Wonthaggi Theatrical Group Inc
EST 1969

Audition Form

Please bring this form completed and signed to your audition

Please attach a recent 'head and shoulders' photo of yourself here

PERSONAL DETAILS:

Name: _____ **Date of Birth:** _____

Address: _____ **Phone:** _____

Email: _____ **Gender:** _____

Do you have a current Working With Children Card (for 18 years and over)?

YES ☐ **NO** ☐

If yes, please bring a copy of your card to your audition

AUDITION INFORMATION:

Show: _____ What role/s are you auditioning for: _____

Would you consider playing another role if it were offered to you?:

YES ☐ **NO** ☐ **MAYBE** ☐

Would you consider being a member of an off-stage vocal ensemble if it were offered to you?:

YES ☐ **NO** ☐ **MAYBE** ☐

Have you auditioned (or intend to audition) for any other productions that will rehearse concurrently with this one?:

YES ☐ **NO** ☐

Are you unavailable for any part or the rehearsal period (Nov 2025 - May 2026)?:

YES ☐ **NO** ☐

If yes, please give reason(s):

_____

DANCE / MOVEMENT ABILITY:

Have you had any formal dance training?:

YES ☐ **NO** ☐

If yes, please detail:

_____

_____

_____

Do you have any physical limitations or current injuries? If YES, please give details:

_____

_____

THEATRE EXPERIENCE:

Have you had any previous theatre experience?:

YES ☐ **NO** ☐

If yes, please detail the year(s) you were involved, the show(s), the theatre group(s), and the role(s) you played:

_____

_____

_____

_____

_____

_____

VOCAL EXPERIENCE:

Have you had any formal vocal training:

YES ☐ **NO** ☐ **If yes, what years/level?** _____

Vocal range (if known) _____ **Do you read music? YES** ☐ **NO** ☐

Voice type (please circle if known);

Soprano Mezzo Alto Tenor Baritone Basso

Can you sing harmony? **YES** ☐ **NO** ☐

If yes, circle how well below;

1 = Not good 2 = Ok 3 = Good 4 = Very good 5 = Great

ACKNOWLEDGEMENT:

I understand that if I am selected to join the cast or crew of this production, I must become a member of the Wonthaggi Theatrical Group Inc. (if not a member already). I understand that this is to ensure that I am covered by the group's insurance policies.

I also understand that if I am selected to join the cast or crew of this production, I give Wonthaggi Theatrical Group Inc. permission to use photographs/video/audio of me for promotional and show related purposes. I am aware that these photographs may;

- Appear in newspapers, on television, and/or in other advertising and promotional material in other media
- Be displayed by the group in its rehearsal space/rooms, at the performance venue, and at future events and performances
- Be distributed to cast members (and others involved in the production) of the shows/performances I have been involved in for commemorative and/or archival purposes.

I hereby confirm that the above information I have provided is true and correct to the best of my knowledge;

Signed: _____ **Date:** _____

For persons under the age of 18 years, this form should also be signed by a parent or guardian;

Signed: _____ **Date:** _____

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COMMITMENT TO THE PROTECTION OF CHILDREN

The Wonthaggi Theatrical Group is committed to creating a safe and protected environment for children.

Every adult involved in ALL WTG activities in any way, shape or form takes on this collective responsibility through making the three non-negotiable commitments detailed below.

1. Following **all** WTG Child Safe policies and procedures.

2. Having a **current** Working With Children's Check

3. **Immediately** standing aside from all WTG related activities if you are under investigation for any criminal or civil offences related to child safety.

Please read and sign below:

I have read and understood the commitments to child safety outlined above and will implement these commitments when involved in any WTG activity.

Name: ……..

Signed: ……

Date: ……..