



Wonthaggi
Theatrical
Group Inc
EST 1969

Ride the Cyclone - 2026

Please complete and sign this form and bring it to your audition, together with a recent photo of yourself (head and shoulders).

PERSONAL DETAILS

Name: _____

Address: _____

_____ Post Code _____

Phone: _____ (home) _____ (work) _____ (mobile)

e-mail address: _____

Gender _____

Date of birth: _____

AUDITION INFORMATION

What part(s) are you auditioning for? _____

If offered another part will you accept it? (circle) YES NO

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 of the rehearsal period YES NO

If YES, please give details of period and reason(s):

If 18 or over: Do you have a current Working With Children Card? YES NO

If YES please bring a copy of your card to the audition

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THEATRICAL EXPERIENCE Please detail your most recent relevant experience

YEAR	COMPANY	SHOW / ROLE

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 already a member) in order to ensure that I am covered by the Group's insurance policies.

If I am selected to join the cast or crew of this production I give Wonthaggi Theatrical Group Inc permission to use photographs of me for promotional and related purposes. I am aware that these photographs may:

- appear in newspapers, on television, and in other advertising and promotional material in other media;
- be displayed by the Group in its rooms, at the performance venue, and at future events and performances; and,
- be distributed to cast members (and others involved in the production) of the shows / performances I have been involved in for commemorative purposes.

I attest that the information I have provided is true and correct.

Signed: Date: / / 2026