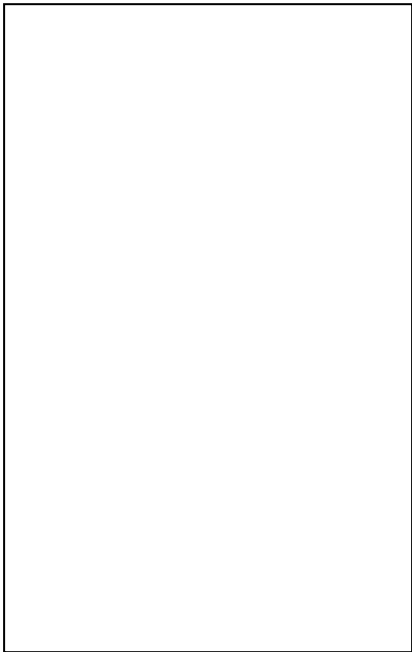


No. _____

Rockville Little Theatre, Inc.

Audition Form

Sherlock's Veiled Secret



Name (PRINT) _____

Address _____

City _____ State _____ Zip _____

Home phone _____

Work phone _____

Cell phone _____

e-mail _____

Gender ____ Age Range _____ Height _____ Hair Color _____

Willing to Cut or Color Hair? _____ Men: Willing to Grow or Cut Facial Hair? _____

List the roles you are interested in:

Will you accept another role? Yes

List theatrical and/or technical experience, training, etc. Give names of plays, roles, participating groups, as well as other pertinent information or attach resume:

If you are not cast in this production, would you be interested in working in the tech area? If so, please specify lights, sounds, costumes, props, construction, etc. _____

I learned about auditions from (name of newspaper, radio, other) _____

Please note: I understand that if I am cast and accept a role in this production, I am obligated to become a member of RLT. If I am cast in this production, I agree to allow the use of my image for publicity and marketing purposes without compensation

Signature: _____