

WCTT – “Joseph & the Amazing Technicolor Dreamcoat”



To be completed by the parent of the child auditioning for the cast:

Please complete ALL information / please print neatly or type.

Please read and COMPLETE the entire form. Please attach a current picture.

Child’s Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, and Zip Code: \_\_\_\_\_

Age: \_\_\_\_\_ Parent’s Phone Number (s): \_\_\_\_\_ School Grade: \_\_\_\_\_

Parent’s Email Address: \_\_\_\_\_

Will your child accept any part? \_\_\_\_\_

Name(s): of any siblings in the play: \_\_\_\_\_

Conflicts that will keep you from attending ALL rehearsals (other activities your child are involved in and the nights they will keep your child away from rehearsals): \_\_\_\_\_

Monday Conflicts: \_\_\_\_\_

Thursday Conflicts: \_\_\_\_\_

Saturday Conflicts: \_\_\_\_\_

Do you understand and accept the rehearsals will be **Monday / Thursday evenings and Saturday Mornings**, at **St. Andrew School**, which will expand in frequency in the months of October and November, and that failure to attend rehearsals may lead to your **removal** from a part / or the play? **Yes or No**

By turning in this form, I hereby grant Waynesboro Children’s Theatre Troupe, the right to use, reproduce and publish photographs of my child, for advertising or other limited purposes. As a parent, you accept the fact that you will need to offer time to assist in the production of the play and/or in such areas as sets, costumes, props, fund-raising, or backstage assistance? **Yes or No**

What is your areas of interest for assistance? \_\_\_\_\_

What is your name and phone number? \_\_\_\_\_

**FIRST REHEARSAL / PARENTS MEETING IS SEPTEMBER 9, 2021 AT 6:15 pm**

**AT St. Andrew School, 12 North Broad Street, Waynesboro, PA 17268**

The non-refundable participation fee of \$15.00 per child or \$35.00 per family with three (3) or more children, is due on the first mandatory parents meeting on **September 9, 2021**, at 6:15 pm. Mandatory parents meetings will be scheduled periodically. If you cannot attend the meeting, it will be **YOUR** responsibility to contact the production directors and / or team leaders to receive all updated information.

Emergency Contact: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Relationship to cast member: \_\_\_\_\_ *Visit our website: [www.WCTT.org](http://www.WCTT.org)*