

RCT Audition Form, Conflict Page, Covid Waiver, Participation Waiver & Head Shot Page

Name:	Parent Name if under 18:
Email:	Parent Email if under 18:
Cell Phone:	Parent Cell Phone if under 18:
Street Address:	Do you work nights? (circle): Yes No
City, State, Zip:	Are you a current BYUI Student? (circle): Yes No
Gender (circle): M F	Age:
Height: Weight:	
List all roles you are interested in:	Would you accept any other roles? (circle) Yes No <input type="radio"/> By checking, I understand I will lose all fees if I circle "yes" above and/or drop once the show is cast.
T-Shirt Size (circle): Youth: S M L XL Adult: S M L XL 2X 3X	Vocal Range (circle all that apply): Bass Baritone Tenor Alto Second Soprano Soprano

List previous theatre experience and training including theatre groups/companies - or attach theatrical resume'.

List special skills or talents (dance, vocal, musical instruments, gymnastic skills, etc.)

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***CONFLICTS - IMPORTANT AND REQUIRED**

Please list ALL scheduling conflicts (including weekends). Make sure to include weekly lessons and appointments as well as one-time-only conflicts, weekends away, vacation plans, recitals, sporting events, family gathering, camps, TREK, church activities, family activities, etc.

If not cast, I would like to help with the following (check all that apply):

Set Construction (age 13+) Props (age 13+) Costumes (age 13+)

Set Painting (age 13+) Stage Tech (age 13+) Spotlight (age 13+)

Publicity Other _____

I agree to pay a non-refundable participation fee prior to auditioning. Please see participation fee information in the FAQ section of our website. Scholarships are available. Unexcused absences, habitual lateness or failure to memorize lines may result in removal from the production. By accepting a role in this production, you agree to participate in publicity photos and give your permission to RCT to use the photos for publicity and promotional purposes. You also agree to be at all assigned rehearsals which will be held on Tuesdays, Wednesday and Thursday evenings; with occasional Friday evenings

and Saturday mornings as needed. You agree to avoid all behaviors that may warrant immediate dismissal from the production. These behaviors include, but are not limited to the following:

- Fighting, physical intimidation or verbal threatening of another cast or production team member.
- Going to any location in the building other than assigned areas.
- The use of alcohol, cigarettes, and other illegal substances.
- Theft or stealing of any form.

Signature (or parent signature) _____ Date ____/____/____

By checking, I agree that I have read the above audition material, the Q&A page on the website, Covid-19 information page on the website and agree to all policies, restrictions, expectations and terms set forth by Rexburg Community Theatre without exception.

RCT Waiver of Liability Due to Covid-19 for ADULTS

I understand the current health crisis in our country and agree to hold Rexburg Community Theatre (RCT) harmless of any contracted virus and/or injury during participation of all activities relating to participating in a RCT production, including but not limited to performing in the shows, being in the lobby, attending rehearsals, auditions, etc. I understand the inherent risks of group settings and the possibility of getting sick. I waive my right to legally pursue RCT or any of its members and/or staff in any way, including the filing of any legal judgment or accusations. This is a legal document and this right is waived for me and family. Although RCT does not require cast or production team members to receive the vaccine, we strongly encourage you to do so to ensure the safety of all involved in the production.

I have completely read, understood and agree to be bound by the above statement (please print your name, sign and date). BY SIGNING THIS DOCUMENT I UNDERSTAND I AM WAIVING MY LEGAL RIGHT TO FILE A LAWSUIT BY PARTICIPATING IN ACTIVITIES THROUGH REXBURG COMMUNITY THEATRE.

Participant's Name Printed: _____

Participant's Signature: _____

Dated: _____

RCT Waiver of Liability Due to Covid-19 for MINORS/CHILDREN

I, the parent and or guardian of the below listed child understand the current health crisis in our country and agree to hold Rexburg Community Theatre (RCT) harmless of any contracted virus and/or injury during participation of all activities relating to participating in a RCT production, including but not limited to performing in the shows, being in the lobby, attending rehearsals, auditions, etc. I understand the inherent risks of group settings and the possibility of getting sick. I waive my right to legally pursue RCT or any of its members and/or staff in any way, including the filing of any legal judgment or accusations. This is a legal document and this right is waived for my child and family. Although RCT does not require cast or production team members to receive the vaccine, we strongly encourage children who are eligible to do so to ensure the safety of all involved in the production.

I have completely read, understood and agree to be bound by the above statement (please print your name, sign and date). BY SIGNING THIS DOCUMENT I UNDERSTAND I AM WAIVING MY LEGAL RIGHT TO FILE A LAWSUIT BY PARTICIPATING IN ACTIVITIES THROUGH REXBURG COMMUNITY THEATRE.

Parent Name Printed: _____

Parent Signature: _____

**If under 18, parents or legal guardian must sign.

Child Name: _____

Dated: _____

RCT Participation Waiver and Release from Liability- Adults

(For adult participants, over 18 years of age, including but not limited to performers, educators, volunteers and staff.

Please complete if you plan to volunteer at rehearsals or during performances)

I, _____ (print your name) have chosen to participate in activities with Rexburg Community Theatre. I acknowledge that I understand the nature of the activities I will be participating in and the possibility that despite precautions, accidents and/or physical injury may occur.

I agree to release and hold harmless Rexburg Community Theatre and their participating partners, including its directors, production team and council members, from any cause of action, claims, or demands now and in the future. I will not hold Rexburg Community Theatre liable for any personal injury or any personal property damage or loss, which may occur on the premises before, during or after rehearsals, performances or any other activity which may occur at a Rexburg Community Theatre sponsored event.

Furthermore I agree to read and follow Rexburg Community Theatre policies and take full responsibility for my behavior in addition to any damage I may cause to the facilities utilized by Rexburg Community Theatre. The policies are available upon request in hard copy or PDF format.

My signature is proof of my intention to execute a complete and unconditional waiver and release of all liability pursuant to the terms herein, and agreement as to all terms and conditions contained above. I am of lawful age and competent to sign this affirmation.

I HAVE FULLY INFORMED MYSELF AS TO THE CONTENTS OF THIS RELEASE AND HAVE READ THE SAME PRIOR TO SIGNING.

Participant's Name (Print):

Signature:

_____ Date: _____

Participation Waiver and Release from Liability - For Minors/Children

(To be completed by legal guardians for participants and assistants under the age 18 years.)

I, _____ (print your name) have chosen to have my child _____ (print child's name), participate in a theatre production provided by Rexburg Community Theatre, Inc. I acknowledge that I understand the nature of the activities my child will be participating in and the possibility that despite precautions, accidents and/or physical injury may occur.

I/We agree to release and hold harmless Rexburg Community Theatre and their participating partners, including its directors, production team and council members, from any cause of action, claims, or demands now and in the future. I/We will not hold Rexburg Community Theatre liable for any personal injury or any personal property damage or loss, which may occur on the premises before, during or after rehearsals, performances or any other activity which may occur at a Rexburg Community Theatre sponsored event.

Furthermore I/We agree to read and follow Rexburg Community Theatre policies and take full responsibility for my/our child's behavior in addition to any damage my child may cause to the facilities utilized by Rexburg Community Theatre. The policies are available upon request in hard copy or PDF format.

My signature is proof of my intention to execute a complete and unconditional waiver and release of all liability pursuant to the terms herein, and agreement as to all terms and conditions contained above. I am of lawful age and competent to sign this affirmation.

I HAVE FULLY INFORMED MYSELF AS TO THE CONTENTS OF THIS RELEASE AND HAVE READ THE SAME PRIOR TO SIGNING.

Participant's Name (Print):

Signature of Parent or Guardian:

_____ Date: _____

HEAD SHOT PAGE

Attach a head shot of any size here. Bring to your audition.