



AUDITION APPLICATION

Name _____ Preferred Pronouns _____

Email _____

Address _____ Phone- Cell _____

City / Zip _____ Phone- Home _____

If cast, contact information is distributed to the Production Staff, please indicate below if you give permission for this information to also be distributed to the Cast: **Yes:** _____ **No:** _____

Do you have a Facebook account? **Yes:** _____ **No:** _____
(Most Directors set up a group page for communications)

Can you read sheet music? **Yes:** _____ **No:** _____
(Not a requirement)

If cast, do you give permission for PCT to publish photos of you for publicity purposes: **Yes:** _____ **No:** _____.

Would you like to be added to PCT's database to receive future emails regarding shows and auditions: **Yes:** _____ **No:** _____

Desired Role(s): _____ Will you accept any role? **Yes:** _____ **No:** _____

Dance/Singing Experience (if any): _____

Special Performance Skills (i.e. Juggling, Guitar Playing, Handstands, Gymnastic etc.): _____

Vocal Range: Bass/Baritone _____ Tenor _____ Alto _____ Soprano _____

Previous Experience (or attach resume)

Show/Role	Theatre Company	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Is there any other information you would like to share with us?

Workshops (Check areas you or your parent can help with – 10 hour minimum) **NOTE:** All cast must help with load-in/strike.

Set/Painting _____ Props _____ Costumes _____ Other (publicity, hair/makeup) _____

Conflicts: (Please list any scheduling conflicts for the rehearsal period)



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Acknowledgement of Risk and Waiver of Liability

I hereby agree to hold Pittsburg Community Theatre (PCT) harmless from, and waive on behalf of myself, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of the event, or that may otherwise arise in any way in connection with any interactions received from participation in PCT events and activities. I understand that this release discharges PCT from any liability or claim that I, my heirs, or any personal representatives may have against PCT with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection with PCT events and activities. This liability waiver and release extends to the PCT, together with all owners, partners, and employees. By signing below, I express my understanding and intent to accept this Release and Waiver of Liability willingly and voluntarily.

Code of Conduct

At Pittsburg Theatre Company (PCT), we want to ensure that each person involved with our organization feels safe and supported in their effort to create live theatre for our community. Our expectation is that the standards set forth in these guidelines are upheld by each participating member. Furthermore, we wish to ensure that safe and confidential avenues exist for any participating members who want to report oppressive behavior occurring within the organization.

- Respecting Your Fellow Artist
- Recognizing Oppressive Behavior
- Sexual Harassment

Any reported incidents of harassment or assault at any PTC function will be taken seriously and dealt with swiftly. Disciplinary actions may include expulsion of the offender from any PTC activities and/or reporting the incident to the police if warranted by the laws of the land.

Zero Tolerance

Zero-tolerance and accountability environment. The Board of Directors must promote mutual respect, tolerance, and acceptance. PTC prides itself on creating and providing healthy and positive Theatre experiences free from harassment. To that end, PTC will not tolerate harassment by any vendor, Theatre participant, or volunteer. Additionally, PTC will not tolerate behavior that infringes on the safety of any Theatre Participant. PTC does not accept any actions of intimidation, harassment, or bullying through action or word, including such behaviors as cyberbullying; direct physical contact, such as hitting or shoving; verbal assaults, such as teasing or name-calling; and social isolation or manipulation. Behaviors as described above will be investigated by the Board of Directors and could result in disciplinary actions up to and including expulsion from any PTC activities including no refund of fees.

Reporting Harmful Behavior

If you witness discrimination, harassment, or any other form of oppressive behavior, know that there are supportive members within our organization with whom you can speak. If you do not feel comfortable addressing the behavior with the creative team of your production, please know that the members of our board of directors are always available as a resource. Refer to your contact sheet from the production team for complete contact information or call 925-439-PLAY (7529) and you can speak with a board member.

Agreement

By signing this form, I agree to all membership and participation terms as listed on the information sheet.

Application and Headshot

Please bring this completed application and headshot to your initial audition.

Signature: _____ Date: _____

Note: If applicant is a minor (under 18) Parent or guardian must sign and provide contact information.

Signature: _____ Date: _____

Name of Parent (printed): _____ Phone Cell: _____

Parent Email: _____ Phone Home: _____