

AUDITION REGISTRATION FORM

PLAY:



Date of audition:	
Director	
Tech Rehearsals	8 & 9 September 2025 from 7pm
Performances	10, 12, 13 September 2025 from 8pm

Please advise which part/s you are auditioning for:

Your contact details

Name	
Address	
Mobile phone	
Email address	

If new to the Arts Theatre, brief summary of acting experience:

Where did you hear of audition? (pls circle)

ATC Website / Team App / Email / Facebook / Instagram / Word of mouth / Other _____

I acknowledge that if cast in a production, for publicity purposes my image may appear on the theatre's website, newspapers & social media.

If cast, I agree to become a member of the Arts Theatre Cronulla. Membership is \$25 per calendar year, payable upon acceptance of role.

Note: By becoming a member you agree to abide by the rules of our Constitution. A copy of the Constitution can be found here: <https://artstheatrechronulla.teamapp.com/clubs/138322/documents/207851-atc-constitution?detail=v1>

Signature: Date: / /