

ACA Performing Arts  
Senior Company Musical

# AUDITION FORMS



## INSIDE THIS PACKET:

### PLEASE BRING THE FOLLOWING FORMS TO AUDITIONS

- ☐ Cast Registration Form
- ☐ Special Commitments Signature Page
- ☐ Cast Fees Worksheet
- ☐ Conflict Form
- ☐ Performing Arts Protection Plan

### PLEASE RETURN THE FOLLOWING FORM BY THE FIRST WEEK OF REHEARSALS

- ☐ Cast Rehearsal T-shirt &  
Performing Arts Parent T-shirt Order Form

### PLEASE SUBMIT THE FOLLOWING FORM ONLINE

- ☐ Parent Volunteer Hours Sign-up

# **RETURN THIS COMPLETED FORM TO AUDITIONS**

## **Cast Registration Form**

### **STUDENT INFORMATION**

Student Name: \_\_\_\_\_ Grade \_\_\_\_\_

Student Phone: \_\_\_\_\_

T- Shirt Size: Child M\_\_\_ Child L\_\_\_ Adult: S\_\_\_ M\_\_\_ L\_\_\_ XL\_\_\_ 2XL\_\_\_ 3XL\_\_\_

### **PARENT/GUARDIAN INFORMATION**

Parent/Guardian Name: \_\_\_\_\_ Cell# \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Cell# \_\_\_\_\_

### **SAFETY & HEALTH INFORMATION**

Does the Student drive?

Does the Student carpool with other students or families?

Any allergies or food restrictions we should know about?

Any physical limitations or injuries we should know about?

Any medical issues we should know about?

\_\_\_\_ Photos & Filming: I authorize my student's appearance in the production photos, videos, and promotional materials.

Additional Emergency Contact: Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

### **SPECIAL TRAINING / SKILLS**

Please let us know of any special skills you have that may be helpful in the production: (example: tap, gymnastics, juggling, puppetry, mime, yodeling, etc :)

\_\_\_\_\_

## RETURN THIS COMPLETED FORM TO AUDITIONS

### Special Commitments Signature Page

Parents: We commit to understanding the policies and procedures of the ACA Senior Co. Musical by:

- A. \_\_\_\_\_ Attending the Parents Meeting **OR**  
B. \_\_\_\_\_ Reviewing the online PA Handbook

Parent Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Students: I commit to understanding and upholding the values of The Performing Arts Program at ACA

#### Core Values of ACA Performing Arts

- ☐ I will graciously accept my role and play it to the best of my ability
- ☐ I will put the needs of the cast above my own needs
- ☐ I will be supportive and respectful of the Directors and my fellow cast members
- ☐ I will rehearse and perform for the Glory of the Lord

Student Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# RETURN THIS COMPLETED FORM TO AUDITIONS

## CAST FEES

Name of Student(s)

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

CAST FEES for Senior Production are **\$200 per student**. (additional students from same family will pay \$175 each) You may pay by CASH, CHECK, PAYPAL OR ADD TO FACTS PAYMENT PLAN

CAST FEES cover script and music licensing, copy of script and rehearsal music, costumes, cast t-shirt, parent t-shirt, cast dinner, workshop, training in vocals, acting, and dancing, cast photos & performance video.

### TO ADD PAYMENT TO FACTS

See Becki Davis in the school office to complete a FACTS form by first rehearsal.

<b>FEES ARE DUE ON OR BEFORE THE FIRST REHEARSAL UNLESS ARRANGEMENTS HAVE BEEN MADE WITH DIRECTOR.</b>
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*Note: If you need an extension of time for payment or would like to apply for The Gale M. Post Performing Arts Fund, please contact Dawn Redden at 918-409-6588 before returning this form to auditions.*

# of children \_\_\_\_\_ Total Due \_\_\_\_\_

I PLAN TO PAY BY: \_\_\_CASH \_\_\_CHECK \_\_\_FACTS \_\_\_PAYPAL ([acatulsa.org/donate-aca](http://acatulsa.org/donate-aca))

\_\_\_\_\_  
Parent name (printed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## RETURN THIS COMPLETED FORM TO AUDITIONS

# CONFLICT FORM

- Cast members are allowed TWO pre-scheduled absences (conflicts)
- AVOID conflicts after Fall or Spring Break when we are running the show
- AVOID conflicts on Saturday rehearsals which means missing 4-6 hours of rehearsal
- Should an unscheduled conflict arise, please contact the Director as soon as possible.
- *Sickness is not a conflict*

### Conflict #1

Date: \_\_\_\_\_ Conflict: \_\_\_\_\_

### Conflict #2

Date: \_\_\_\_\_ Conflict: \_\_\_\_\_

\_\_\_\_\_ I have NO KNOWN CONFLICTS

Student's Name \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

## RETURN THIS FORM & PAYMENT by August 30th

OPTIONAL

### Cast Rehearsal Tee Shirts

(May be worn in rehearsals and performing arts classes)

Student Name: \_\_\_\_\_ SIZE: YM YL AS AM AL XL (add \$3) 2X 3X

#### The Performing Arts Logo Tee\*

**\$10 each or \$13 for Adult 2X or larger**

Crew neck black with logo and mission statement

\*certain sizes may require ordering. Please allow 2-3 weeks.



TOTAL DUE: \$ \_\_\_\_\_ Check# \_\_\_\_\_ Cash \_\_\_\_\_

### Parent Performing Arts Logo Shirt

(Must be worn while volunteering in our program.)

All new Performing Arts families will receive **ONE FREE PARENT TEE.**

Parent Name: \_\_\_\_\_ I am (circle one) NEW /  
RETURNING

#### REQUEST FOR ONE **FREE PARENT TEE**:

TSHIRT SIZE: YM YL AS AM AL AXL (add \$3) 2X 3X

#### ORDER OF ADDITIONAL TEE(s):

TSHIRT SIZE: YM YL AS AM AL AXL (add \$3) 2X 3X

#### The Parent Performing Arts Logo Tee\*

**\$10 each or \$13 for Adult 2X or larger**

Crew Neck, Heather Gray, Soft Cotton

\*certain sizes may require ordering. Please allow 2-3 weeks.

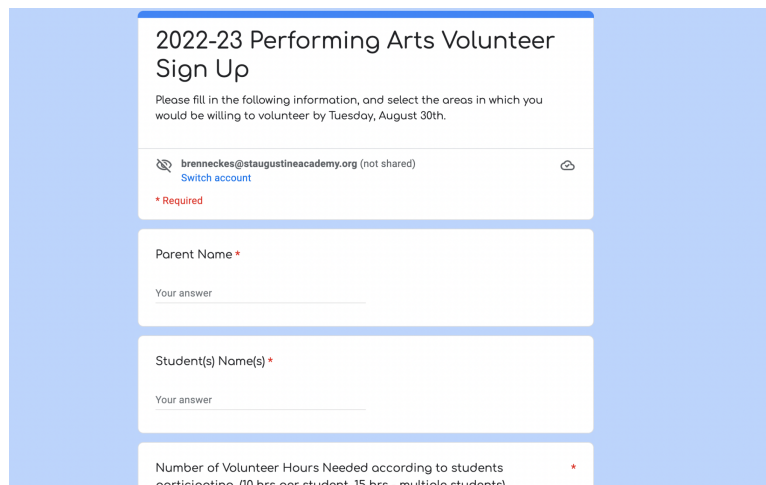


TOTAL DUE: \$ \_\_\_\_\_ Check# \_\_\_\_\_ Cash \_\_\_\_\_

**PLEASE COMPLETE THIS FORM ONLINE  
BEFORE AUDITIONS**

# PARENT VOLUNTEER HOURS

- ☐ The support and assistance of our Cast Parents is vital to the success of the program
- ☐ Each cast parent is asked to contribute 10 hours of volunteer service to the show (15 hours - multiple students)
- ☐ You may purchase up to 1/2 of your hours for \$10/hour
- ☐ Parents may choose to help in various areas: sewing, set, concessions, decorating, etc
- ☐ Please sign up for your volunteer hours by using our online google form. A link to the form can be found under the Performing Arts Tab at acatulsa.org



The screenshot shows a Google Form titled "2022-23 Performing Arts Volunteer Sign Up". Below the title, it says "Please fill in the following information, and select the areas in which you would be willing to volunteer by Tuesday, August 30th." The form is displayed on a blue background. It includes a header section with the email "brenneckes@staugustineacademy.org (not shared)" and a "Switch account" link. Below this, there are three input fields: "Parent Name \*" with a red asterisk, "Student(s) Name(s) \*" with a red asterisk, and "Number of Volunteer Hours Needed according to students participating. (10 hrs per student, 15 hrs - multiple students)" with a red asterisk. Each input field has a "Your answer" label and a text entry line.

- ☐ I have filled out the online Parent Volunteer Google Form

Parent Signature:

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# ACA Performing Arts Protection Plan / Sr. Company

In order to maintain a positive environment and a joyful experience for all who participate in performing arts, we are asking all cast, crew, and production staff to RECOGNIZE, RESIST, and REPORT all unacceptable behavior in the following areas:

## TALK

Acceptable Talk	Unacceptable Talk
Respecting leadership Theatre Talk-Back: "Thank you 5!" Memorizing your lines Positive Self-talk Encouraging fellow castmates Positive, upbeat attitude	Disrespecting leadership Disruptive, side-conversations Criticizing fellow cast members Negative self-talk Bullying Inappropriate topics / joking

## TOUCH

Acceptable Touch	Unacceptable Touch
High-fives Fist bumps Side hugs Assigned Choreography Assigned Blocking Cast prayer circles Cast huddles & cheers	Aggressive, negative touch Disrespecting personal boundaries Hanging, lingering touch

## TERRITORY

Acceptable Territory	Unacceptable Territory
Staying on campus Staying in the group spaces Respecting rehearsal spaces Respecting stage & backstage areas "Rule of 3" - dressing & bathrooms	Leaving fenced areas of campus Wandering away from group Invading other people's property Destruction of ACA property One-on-one with cast, crew, staff

I understand that any violation of this Protection Plan may result in my removal from rehearsal or from the production as a whole.

\_\_\_\_\_  
Cast member signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian signature

\_\_\_\_\_  
Date