

Oconee Youth Playhouse

Audition registration form (Descendants, the musical)

Name: _____ Age _____ Birthday _____

Male or Female (circle one) School _____ Current Grade: _____

Parents' names:

Parent 1: Home # _____ Cell # _____

Parent 2: Home # _____ Cell # _____

Address: _____

City _____ Zip _____

EMAIL (print neatly) where you want cast list sent and subsequent important info:

Email # 1: _____

Additional email if desired: _____

Emergency contact: _____ Phone: _____

If you are new to OYP, or you do not take OYSP classes, please tell us any special skills/training:

Specific Show requests June 7-9. If you have a conflict with ANY of these dates, please state them clearly here – Note- conflicts with actual performances may mean you can't be in the show at all. Double casting can sometimes work but it will depend on numbers and overall casting.

I have read and understand all the audition information regarding conflicts, fees and rehearsal information. I also agree to the terms of auditions, which means accepting any role/ensemble part my child is given and understanding that all casting decisions are final and are not open for discussion with the directors.

Parent signature

Date