



Name \_\_\_\_\_ Number \_\_\_\_\_

### Thumbs Audition Form

Please Submit Electronically To [Ray Thompson](#) Or Print Clearly and Bring With You

Name: \_\_\_\_\_ Phone (best contact): \_\_\_\_\_

Address: \_\_\_\_\_ E-mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: \_\_\_ M \_\_\_ F

Believable Age Range: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Eye Color \_\_\_\_\_ Hair Color \_\_\_\_\_

Are you auditioning for a specific role? \_\_\_ Yes \_\_\_ No If yes, which role? \_\_\_\_\_

If you are not cast, would you be interested in being on the production team? \_\_\_ Yes \_\_\_ No

Are you a DCP member? \_\_\_ Yes \_\_\_ No

**Please Note: Anyone over 18 must have the following clearances**

- **FBI Child Abuse Clearance or Signed Disclosure Statement**
- **PA State Police Criminal Clearance**
- **PA State Child Abuse Clearance**

\_\_\_\_\_ I understand that I must submit my clearances within 2 weeks of being cast or I will be replaced. (Please initial)

Please mark (X) those items you are unwilling to do:

- Cutting your hair                       Growing your hair long                       Coloring your hair
- Shaving facial hair                       Growing facial hair                       Smoking on stage

Please mark (X) below **ALL CONFLICTS** during the rehearsal and performance period. Include vacations, holidays, weddings, graduations, family gatherings, business trips etc. **You must be available for ALL PERFORMANCES and from Sunday 09/15 through Opening Night 09/20!**

JULY

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

AUGUST

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

SEPTEMBER

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

Please attach your resume to this form, OR list acting experience and any areas of technical expertise (props, painting, lighting, etc) on the back of this form.

*Resume Space (please list acting or production experience)*



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*Auditioners please make no marks below this line. Thank you.*

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Offered Role of: \_\_\_\_\_  Accepted  Declined  No Role Offered

Notified by: \_\_\_\_\_ on \_\_\_\_\_

*Please Submit Electronically To [Ray Thompson](#) with headshot and resume if available*