



Audition Form

Name _____ Age _____ Date of Birth _____

Address _____ Telephone # _____

Cast Member's E-mail _____

Parent/Guardian E-mail _____

1. If cast, I will attend every rehearsal with the exception of illness or a family emergency.

Yes No

2. I understand that I/my child may be recast if they miss a rehearsal due to the short rehearsal time period.

Yes No

3. I understand there are NO REFUNDS and the \$300 tuition must be paid at the first rehearsal unless previous arrangements have been made. I am aware the performance is the culmination of an "Intensive Training Program."

Yes No

4. I agree to not audition for any show which could conflict with WISP's "All the World's a Stage."

Yes No

Cast Member's Signature _____

Cast Member's Printed Name _____

I give permission for _____ (print neatly) to participate in WISP's "All the World's a Stage." I have read, understand, and agree to the stipulations listed above.

I also understand I am responsible for my child's transportation and will make sure he/she arrives at least 5 minutes prior to the scheduled rehearsal start. I will leave a message at 203-494-1633 at least 24 hours prior to start time if I/my child cannot attend a rehearsal for any reason.

Hold Harmless

By submitting this application and waiver, you release Wagner Iovanna Studio Productions and its affiliates and employees from all claims related to any injury which may be sustained by you or your child while attending any of our workshops, performances, rehearsals, or events associated with Wagner Iovanna Studio Productions. You affirm that you currently have and will continue to carry proper medical, health, hospitalizations, and accident insurance, which you consider adequate for you and your child.

Photo Waiver

We would like your permission to use your child's photo in our advertising, including but not limited to social media, print media, and possibly TV.

Parent/Guardian Printed Name _____

Parent/Guardian Signature _____