

Office Use Only: # \_\_\_\_\_  
Signed Contract \_\_\_\_\_  
Conflict Calendar \_\_\_\_\_

Dance: \_\_\_\_\_

**Talon Theatre**  
**THE FANTASTICKS**  
**AUDITION FORM**  
**PRINT NEATLY PLEASE**

*(Attach picture, resume, contract, and conflict calendar)*

NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_ HEIGHT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ SHOE SIZE: \_\_\_\_\_

ZIP: \_\_\_\_\_ CELL PHONE: ( ) \_\_\_\_\_ Student email: \_\_\_\_\_

HOME PHONE: ( ) \_\_\_\_\_ Parent email: \_\_\_\_\_ Parent Cell: ( ) \_\_\_\_\_

Are you a Thespian or Junior Thespian? Yes No

Are you auditioning for a specific role? If so which one (s)?

If you are not cast in this role, do you wish to be considered for another? Yes No

If you are not cast in the show would you like to be considered for a tech running crew? Yes No

If yes, which crew are you interested in? Please number in order of preference

Costume \_\_\_\_\_ Makeup/Hair \_\_\_\_\_ Lighting \_\_\_\_\_ Sound \_\_\_\_\_ Construction/Props \_\_\_\_\_

Do you take voice lessons? Yes No If yes, who is your voice teacher?

Do you have any special gymnastics skills? Explain:

List any previous Talon Theatre Productions you have been in: **(Attach Resume for this)**

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DIRECTOR'S NOTES:

CALLED BACK FOR:

DANCE: \_\_\_\_\_

SOLOIST: YES \_\_\_\_\_ NO \_\_\_\_\_ VOCAL RANGE: \_\_\_\_\_

# THE FANTASTICKS



## TALON THEATRE PRODUCTION TEAM APPLICATION Fall 2021

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

Email: \_\_\_\_\_

Are you enrolled in IB Theatre?    Yes        No

- \_\_\_ **Assistant Music Director**
- \_\_\_ **Assistant Choreographer**
- \_\_\_ **Stage Manager**
- \_\_\_ **Asst. Stage Manager**
- \_\_\_ **Design Team:**

(Please number 1 being highest- according to interest, skill, or passion. May also be performers)

- Scenic Design \_\_\_
- Light Design \_\_\_
- Costume Design\_\_\_
- Hair/Makeup Design \_\_\_
- Prop Design & Construction\_\_\_\_\_
- Dramaturge \_\_\_

Please list your specific design skills and experience from the choices above:

\_\_\_ **Technical Team:** (Non-performing)

These individuals will be responsible for *collaborating with the designers* to execute the design. All positions below can also be part of the **Construction Crew**. Number like previous section.

- Light Board Operator** \_\_\_
- Asst. Sound A2** \_\_\_
- Deck/Prop Crew** \_\_\_
- Construction Crew** \_\_\_
- House Crew** \_\_\_
- Spot Operator** \_\_\_

\_\_\_ **Marketing/PR/Graphic Design:**

Responsible for creating visual art for the program, tickets, flyers and the Talon Theatre webpage and will also be responsible for updating Talon Theatre social media pages, like Facebook, Instagram, Twitter, etc. with pictures and announcements about THE FANTASTICKS.

**DEADLINE FOR THE FANTASTICKS PRODUCTION TEAM APPLICATION: AUGUST 30<sup>TH</sup>**

**AUDITIONS WILL BE HELD SEPTEMBER 7<sup>TH</sup>.**

**THERE IS A SEPARATE AUDITION PACKET FOR PERFORMERS.**

**Designers will be required to attend weekly production meetings.**

NAME: \_\_\_\_\_ STUDENT CELL PHONE# \_\_\_\_\_

TALON THEATRE FALL PRODUCTION **CONFLICT CALENDAR**

**CAST/CREW**

**TECH WEEK/SHOW WEEK - NO CONFLICTS ACCEPTED FROM OCT 16-31**

Rehearsals Times: MON-WED 2:45-5:30, Sat. 10:00-4:00

**REMEMBER TO CONSIDER OTHER OBLIGATIONS SUCH AS CHOIR, MUN, CONFIRMATION, BAND, SPORTS  
ON EACH DATE WRITE THE TIME YOU ARE NOT AVAILABLE**

**SEPTEMBER 2021**

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
5	6 NO SCHOOL	7 AUDITIONS 2:45-6:00	8 CALLBACKS 2:45-6:30	9	10	11 Rehearsal 10:00-4:00
12	13 Thespian Board Mtg. 2:45-3:30  Rehearsal 3:30-6:00	14 Thespian General Mtg. 2:45-3:30  Rehearsal 3:30-6:00 Carps: Shop 3:30-6:00 Production Mtg. 6-7	15  Rehearsal 2:45-5:30 Carps: Shop 2:45-5:30  <b>PARENT MEETING</b> 6:00PM	16	17	18 Thespian Officer Southern Leadership (V)  Homecoming Dance
19	20 Rehearsal 2:45-5:30	21 Rehearsal 2:45-5:30  Carps: Shop 2:45-5:30 Production Mtg. 5:30-6:30	22 Rehearsal 2:45-5:30  Carps: Shop 2:45-5:30	23	24	25 Rehearsal 10:00-4:00  Carps: Shop 10:00-4:00
26	27 NO SCHOOL	28  Rehearsal 2:45-5:30  Carps: Shop 2:45-5:30 Production Mtg. 5:30-6:30	29  Rehearsal 2:45-5:30  Props & Carps: 2:45-5:30	30	1	2 Rehearsal 10:00-4:00  Hair and Makeup 10-2

# OCTOBER 2021

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	<b>4</b> Thespian Board Mtg. 2:45-3:30  Rehearsal 3:30-6:00 Props 3:30-6:00	<b>5</b> Thespian General Mtg. 2:45-3:30  Rehearsal 3:30-6:00 Costume Load In: 3:30-6 Production Mtg. 6-7	<b>6</b> Fittings 2:45-5:30  Costumes: 2:45-5:30	<b>7</b>  Fall TAPA Showcase	<b>8</b> LOAD IN 2:45-6:30  Lights & Carps 2:45-6:30	<b>9</b> Rehearsal 10:00-4:00  Lights, Carps, Props Hair and Makeup 1:30-4
10	<b>11</b> Rehearsal 2:45-7:00  Props 2:45-7:00	<b>12</b> Rehearsal 2:45-7:00  Props 2:45-7:00	<b>13</b> Rehearsal 2:45-7:00  Props 2:45-7:00	<b>14</b> Rehearsal 2:45-7:00  Props 2:45-7:00	<b>15</b>	<b>16</b> Rehearsal 10:00-4:00  Props & Lights 10-4
17	<b>18 TECH WEEK</b>  Rehearsal 2:45-9:00 Costumes: 2:45-6:00  NO CONFLICTS ACCEPTED	<b>19 TECH WEEK</b>  Rehearsal 2:45-9:00 Lights: 2:45-9:00  DINNER PROVIDED NO CONFLICTS ACCEPTED	<b>20 TECH WEEK</b>  Wet Tech 2:45-9:00 Lights, Sound, Props 2:45-9:00  DINNER PROVIDED NO CONFLICTS ACCEPTED	<b>21 TECH WEEK</b>  Wet Tech 2:45-9:00 All crews called 2:45-3:30 for lanyard photos  Lights, Sound, Props 2:45-9:00  DINNER PROVIDED NO CONFLICTS ACCEPTED	<b>22</b>	<b>23 TECH WEEK</b>  Dress Rehearsal w/ Orchestra 10:00-6:00 Cast lanyard photos 11:30-12:30  ALL SHOW CREW 10-6 LUNCH PROVIDED NO CONFLICTS ACCEPTED
24	<b>25 SHOW WEEK</b>  Dress Rehearsal 2:45-10:00 DINNER PROVIDED ALL SHOW CREW 2:45-10  NO CONFLICTS ACCEPTED	<b>26 SHOW WEEK</b>  Dress Rehearsal 2:45-10:00 DINNER PROVIDED ALL SHOW CREW 2:45-10  NO CONFLICTS ACCEPTED	<b>27 SHOW WEEK</b> 7:00PM Faculty Preview Cast 2:45-10:00 DINNER PROVIDED ALL SHOW CREW 2:45-10  NO CONFLICTS ACCEPTED	<b>28 SHOW WEEK</b> 7:00PM Opening Night Cast 3:30-10:00 DINNER PROVIDED ALL SHOW CREW 3:30-10  NO CONFLICTS ACCEPTED	<b>29 SHOW WEEK</b> 7:00PM Performance  Cast 3:30-10:00 DINNER PROVIDED ALL SHOW CREW 3:30-10  NO CONFLICTS ACCEPTED	<b>30 SHOW WEEK</b> 7:00PM Performance  Cast 3:30-10:00 LUNCH PROVIDED ALL SHOW CREW 3:30-10  NO CONFLICTS ACCEPTED
<b>31 2:00PM LAST PERFORMANCE</b> Cast 10:00-7:00 ALL SHOW CREW 10-7 LUNCH & PIZZA PROVIDED STRIKE NO CONFLICTS ACCEPTED	<b>1</b> STRIKE 2:45-5:30 ALL SHOW CREW					

**TALON THEATRE REHEARSAL AND PERFORMANCE CONTRACT  
THE FANTASTICKS**



*To be read and signed by student and parent/guardian*

**1. Schedule:** A Detailed rehearsal schedule with specific call times will be made available after auditions. Every effort will be made to respect the student’s time during rehearsals. Rehearsals will begin on time and will end promptly according to the schedule. Students are expected to arrive 5 minutes before their call time. *Some roles may be double cast. If you are double cast, you will be informed of your performance dates at the first rehearsal. If your role is double cast, you will take turns on stage. You are expected to attend all rehearsals, shadow the alternate cast member and notate all blocking and notes during rehearsal when not on stage.*

Due to the time consuming and complex nature of a major production, I must ask your careful consideration and cooperation in scheduling trips, doctor, and dental appointments, and family events that conflict with the rehearsal schedule. *One of the goals of educational theatre is for students to learn how to manage their time.* Each member of the cast is a vital part of the “team.” In a small ensemble show, this becomes even more important. Your commitment to the production is a commitment to your fellow cast members. This sometimes requires difficult choices. Please discuss your personal and school calendars and determine your priorities before auditioning for the show. Remember to consider commitments you have made to other SMCHS organizations, teams, and clubs. *While we want to provide opportunities for students to participate in a variety of activities, some conflicts may create undue hardship on the team, organization, or production and may be non-negotiable. It is the student’s responsibility to communicate with the director, coach, or teacher in advance to determine this.* To assist students and families in this process, we ask that you please list all conflicts on the Conflict Sheet. An unexcused absence from a rehearsal may result in the student’s dismissal from the cast. Please note that STRIKE is on Sunday following the final performance and is mandatory for all cast members. Dinner will be served. *Strike will end by 7:00 p.m.* Thank you in advance for your cooperation!

**2. Participation Fee:**

**CAST Participation Fee** **\$500**

*Billed through FACTS on Sept. 17 and Oct. 15*

The participation fee includes all of the following:

Costumes, Makeup, Wigs, Production Expenses, Show T-shirt, and performance week dinners (10 meals)

**TECH Participation Fee** **\$150**

*Billed through FACTS on Sept. 17 and Oct. 15*

The participation fee includes all of the following:

Production Expenses, Show T-shirt, and performance week dinners (10 meals)

**OPTIONAL PURCHASES:**

Show recording, cast & crew photos, lanyards will be available for purchase at our new Talon Theatre Store.

**3. MANDATORY VIRTUAL PARENT INFORMATION MEETING:** There will be a mandatory meeting for all parents of CAST and CREW members on September 15<sup>th</sup> at 6:00 PM. One adult from each family is asked to attend. Students do not need to participate for the parent meeting. A virtual team meeting invite will be sent by Sept. 14th to the email you provide in the contract information below.

**4. G.P.A.** Students must have a 2.0 G.P.A. for the current quarter in order to participate in the show. Students must be in attendance at school for at least the minimum required periods in order to attend extra curricular activities. This includes rehearsals.

**5. Discipline:** Theatre is a collaborative art form requiring the cooperation of all participants. Talon Theatre students are expected to conduct themselves in an appropriate manner that upholds Catholic Christian values of mutual respect and dignity and to adhere to all policies outlined in the SMCHS and Diocesan handbook. Parents will be contacted immediately should the need arise.

**6. CASTING PHILOSOPHY: PARENTS AND STUDENTS PLEASE READ CAREFULLY:** Talon Theatre is an Educational Theatre program. Therefore, it is the goal to give as many students an opportunity to learn and grow through the rehearsal and performance process as possible. Some roles may be double cast or cast with non-performing understudies. Into the Woods will be cast with a small chorus and off stage pit singers. It is understood that all performers on and off stage will be eligible for PE credit.

*Casting is based primarily on the strength of the audition with some consideration given to a student's involvement and commitment to Talon Theatre including years of experience, training, classes, and Thespian affiliation. However, there is no policy stating that seniors have priority over underclassmen. Students and parents are asked to remember that theatre is a "team sport" with no small parts. Casting in theatre is inherently competitive but students are encouraged to enter into the audition process with a positive, supportive spirit and to graciously accept whatever role in which they are cast trusting the judgment of the directing team and the work of the Holy Spirit. The potential to grow comes with every experience.*

**THESPIAN PLEDGE:**

I promise to uphold the aims and ideals of the International Thespian Society. I am a student of theatre and excellence is my ideal. I promise to perform my part as well as I can, to accept praise and criticism with grace, to cooperate with my fellow Thespians, to work for the good of the troupe, and to share my love of theatre.

Yes I have read, understand, and agree to the policies and procedures of Talon Theatre. I verify that my G.P.A. for the current quarter is at least a 2.0

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

Student T-Shirt Size: \_\_\_\_\_ Food Allergies/Restrictions: \_\_\_\_\_

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

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent 1 Name: \_\_\_\_\_

Parent 2 Name: \_\_\_\_\_

Preferred Parent Email: (WE WILL SEND ALL IMPORTANT INFORMATION & COMMUNICATIONS TO THIS EMAIL)

\_\_\_\_\_

Parent 2 Email: (IF YOU WOULD LIKE ANOTHER PARENT TO ALSO RECEIVE EMAIL COMMUNICATIONS)

\_\_\_\_\_

Parent Cell Phones: ( ) \_\_\_\_\_ ( ) \_\_\_\_\_

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

**Thank you for your support of SMCHS Talon Theatre and the arts in education!**

**SANTA MARGARITA CATHOLIC HIGH SCHOOL  
STUDENT MEDICAL RELEASE**

I hereby request that \_\_\_\_\_ participate in the Spring 2021 Production  
(*Students Name*) \_\_\_\_\_ produced by Talon Theatre

I, the parent (guardian) of the above named student, hereby, give my permission for his/her participation in the activity named above.

I agree to direct my child to cooperate and conform with directions and instructions of the supervisory personnel in charge of the activity.

I am not aware of any medical condition of my child which would render it inappropriate for him/her to participate in any such activity.

Should it be necessary for my child to have medical treatment (including dental or hospital treatment) when they are being supervised by SMCHS personnel, I hereby give the school personnel permission to use their best judgment in obtaining medical service for my child, and I give permission to the physician selected by the school personnel to render medical treatment deemed necessary and appropriate by the physician.

I agree that in the event my child is injured as a result of his/her participation in the above named activity, whether or not caused by the negligence (active or passive) of the school or any of its agents or employees, recourse for the payment of any resulting hospital, medical, dental treatment or related costs and expenses will first be had against any accident, hospital, medical or dental insurance, or any available benefit plan of mine and/or of my spouse.

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

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

Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Health Insurance Company: \_\_\_\_\_

Health Insurance Phone #: \_\_\_\_\_

Health Insurance Policy #: \_\_\_\_\_

Doctor's Name and Phone Number: \_\_\_\_\_

\_\_\_\_\_  
(*Parent or Guardian's Signature*)

\_\_\_\_\_  
(*Date*)



**Emergency Contact Information**

In the event of an emergency, SMCHS will attempt to contact the student's parents/guardians. If they cannot be reached, please provide three additional relatives/friends SMCHS can contact. If you do not have enough emergency contacts, please enter n/a into the field.

**Contact 1**

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

Phone 1: \_\_\_\_\_

Phone 2: \_\_\_\_\_

Relation to Student: \_\_\_\_\_

**Contact 2**

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

Phone 1: \_\_\_\_\_

Phone 2: \_\_\_\_\_

Relation to Student: \_\_\_\_\_

**Contact 3 - Out of state contact**

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

Phone 1: \_\_\_\_\_

Phone 2: \_\_\_\_\_

Relation to Student: \_\_\_\_\_