

Cincinnati Black Theatre Company

Production Interest _____ Date _____

Please Print

Full Name: _____ DOB: _____ Sex: M F

Address: _____ City: _____ State: _____ Zip: _____

Cell #: _____ Email: _____

Parents' name (if under 18): _____ Parent's home #: _____

Parents' cell and email: _____

School: _____ Grade: _____

Do you currently work: Full Time Part Time Casual Work Hours: _____

Work Phone #: _____ Work Email: _____

Previous Acting/ Dancing/ Singing/ Theatre Experience and Formal Training: (Feel free to use back of form if more space is needed)

Resume Attached Theatre Experience

Production Name	Character/Role	Theatre/Venue	Organization/School	Date/Yr

Formal Training: Please specify on back of form if not on resume.

Special Talents/Skills: Please specify on back of form if not on resume.

Voice Type (circle one) Soprano Mezzo Alto Tenor Baritone Bass unknown

In the event you do not get a part, would you still be interested in remaining involved with the production in any of the following areas? (Please circle all that apply)

Stage Mgr Lighting Set Construction Costumes Advertising/Publicity
 Stage Crew Sound Make-up Ushering Tickets/Concessions

Would you like to be added to our mailing list? (Please circle) Yes No Already on the list

For CBTC office use only:

Speaking Voice: 1 2 3 4 5
 Body Movement: 1 2 3 4 5
 Acting Ability: 1 2 3 4 5
 Monologue: 1 2 3 4 5
 Singing Voice: 1 2 3 4 5

Additional Notes: _____

Reference# _____ Call Back: Y N