



FROZEN

Name _____ Pronouns _____

Address _____
Street City State Zip

Student Phone _____ Student Email _____

Parent Phone _____ Parent Email _____

Gender You Prefer To Be Cast As? _____ Will You Accept A Role of the Opposite Gender Listed? _____

Brief Description of Theatrical Experience: _____

Please list any apparent/known conflicts **Sept. through Nov.** – no conflicts accepted after day of audition.

Please be aware that this is a tuition-based class (\$300.00). **If you are in 8th grade or under you are required to take either Broadway Bound (Tuesday Night) OR Dance Class (Sunday Night) or if you are in high school you are required to take Dance Class (Sunday).**

Initial that you understand this here and choose on back of this form: _____.

If cast in this production of FROZEN your companion classes will be discounted to reflect the amounts below (choose one):

BROADWAY BOUND 1-8

(Tuesdays, September 14-November 16; 5:00pm-7:00pm)
\$100.00

DANCE CLASS - GRADES 1-12

(Sundays, September 12-March 14; TIME TBD) \$100.00

If you choose this class, you will be contacted by the end of the year to come in for a dance evaluation. This will help us place you in the correct class.

Again, please be aware that **this is a requirement** to participate in FROZEN.

If you need scholarship information, please request from Sydney Gray at Sydney@clearspacetheatre.org