University of Puget Sound Theatre Arts Department

Acceptance of Role

Name of Show Your Name				
				Phone
I accept the role of		in		
1.	I have read the Production and Rehearsal Guidelines and agree to their terms.			
		Yes	No	
2.	I have read the schedule of time commit accordingly, except for those conflicts pr	ments for this pro reviously noted or	duction and will plan my schedule my audition sheet.	
		Yes	No	
3.	I understand that I am responsible for supplying my own basic make-up kit.			
		Yes	No	
4.	I agree to have my name appear on the program, in press releases, and on the web.			
		Yes	No	
5.	I agree to have photos of me appear on display in Jones Hall, in press releases, and on the web.			
		Yes	No	
6.	I agree to wear costumes and make-up as requires nudity, the student will be infor	s designed for my med prior to being	character. (If a costume design g asked to sign this form.)	
		Yes	No	
7.	I agreed on my audition sheet to have my hair and (for men) beard cut or not cut according the needs of the production		n) beard cut or not cut according to	
	me needs of the production	Yes	No	
8.		y hair colored and	hair colored and/or styled according to the needs of	
	the production	Yes	No	
-	have questions or concerns with regard to heet and talk to the director.	any of the above	, please note them on the back of	
Sione	d	Г	Dated	