≝ limelight theatre company

Summer 2025 Casting Sheet

Please print clearly!

Name:	Age: Gr	ade 2025-2026:	School:		
Preferred Pronouns: Height:	Voice Part & F	Range* (musicals on *Range should be	uly) :e noted assuming middle C is C4. Ex) A3-F5		
Actor Email Address:		E	Birth date:		
Parent Name:	Parent Email Address:				
Parent Cell Phone:	T-shirt S		or Adult): able for Merci Beaucoup and Anastasia only)		
CHECKLIST!					
 □ I have attached ANY and A (Be sure to list specific date □ I have attached a recen □ I have filled out BOTH s □ My parent/guardian has 	s and times as t t picture of mys sides of this she	his may affect o elf et	our casting decisions.)		
Waiver And Re	lease of All Claims	and Assumption o	f Risk		
Please read this carefully and be aware that in sign liability and waiving and releasing all claims for injuany and all activities connected with and associate	uries, damages or loss wh	ich you or your minor chi	ild/ward might sustain as a result of participating in		
child/ward or I may have or which may accrue to me program/activity. Warning of Risk: Recreational programs and activities are intended to careful and proper preparation, instruction, medica recreational program. Understandably, not all haza that certain risks, dangers, and injuries due to incle unsportsmanlike conduct, premises defect, inadequence.	s, regardless of severity, the my minor child/ward may trict, including its officials, e and forever discharge the or my minor child/ward to challenge and engage all advice, conditioning, and the same tweather, slipping, faute or defective equipment water or defective equipment.	nat my minor child/ward of have (or accrue to me of agents, volunteers, and an arising out of, connect the physical, mental, and dequipment, there is still oreseen. Depending on the ling, poor skill level or cent, inadequate supervision.	or I may sustain as a result of said participation. I by my child/ward) as a result of participating in this employees (hereinafter collectively referred to as all claims for injuries, damages or loss that my minor ected with, or in any way associated with this demotional resources of each participant. Despite a risk of serious injury when participating in any the particular activity, participants must understand conditioning, carelessness, horseplay,		
Oswegoland Park District to guarantee absolute sa I hereby give my consent for the Park District to us flyers, videos, websites, etc. I understand that the I from time to time and that these photos/video cove for copies of photos/videos will be honored, when p	afety. Photo/Video Autho e photos/video coverage Park District staff may take erage remain the property	rization: of myself and/or minor che photos/video coverage of the Park District. Follo	nild/ward in future Park District program guides, of its programs and events, and their participants		
Signature of Adult Participant or Parent/Guardian o	- of Participant	————— Date	OSWEGOLAND PARK DISTRICT		

Which production(s) are you interested in performing in?

 If you want to be in choice, etc. 	more than one s	show, please rank them v	vith 1 as your top choice, 2 for seco	nd
•	for any show that	t you do not want to be in	or cannot be in.	
Personal Effe	•	•		
Merci Beauco		,		
	,	n Edition) (ages 8-14)		
The Wizard o	f Oz (ages 14 & i	up)		
Are you interested in any	v of the followin	a responsibilities?		
•		Stage Manager	Stage Crew	
· ——				
If interested in Student Ass	istant Directing, ple	ease fill the additional applic	cation at limelighttheatrecompany.org	
Carpool Request: Please list anyone that you together; we will take these Conflicts:	•	•	omise that everyone listed will be ca casting process.	ıst
	•		g this production. Be sure to list spe	cific
Experience: List or attach any previous School where you perform	• .	ce. It is helpful if we knov	w the Role, Show, and Theatre Com	ıpany
List or attach any training tumbling, speech, debate		kills related to performing	. This includes dance, music, juggli	ng,