PLEASE NOTE: Due to licencing restrictions a performance fee cannot be paid to any child appearing in this production.

Imagine Theatre Ltd

Imagine Ref No. ……

Beauty and the Beast

Junior Ensemble Auditions at Adam Smith

Please complete the form below in advance and bring it with you on the day.

Child's Name (Block Capitals)							
Child's Address (Block Capitals) **Postcode**							
Date of Birth			**Gender at Birth**		**Gender Identity**		
Age on 01/11/2026				**Years**		**Months**	
School year your child will be in during performances. (Children above year S4 cannot audition)	**P5**	**P6**	**P7**	**S1**	**S2**	**S3**	**S4**
School Name							
Education Authority (based on home not school address)							
Name of dance school/ performing arts group attending (if any)							
Medical Information - Please advise us of any medical condition we need to be aware of – particularly on audition day. (This information will remain confidential and is for welfare reasons only)							

PARENT/GUARDIAN CONTACT DETAILS Please write clearly in Block Capitals

Name		**Relationship to child**	
Telephone		**Mobile**	
Parent's Email (essential)		**Member of the PVG Scheme?** **Willing to obtain a PVG?**	Y/N Y/N

If different from above, Emergency Contact details for parent / guardian on Audition Day. Please be aware an adult must be at the auditions, in the building for as long as the child is required on audition day.

Name		**Relationship to Child**		**Contact number**	

PARENT / GUARDIAN CONSENT

I hereby give permission for the child named above to participate in the auditions of this pantomime, I understand that the decisions made by Imagine Theatre Ltd are final. I also give permission for photographs/videos of my child to be taken on the audition day and if successful at rehearsals and performances. I understand that any photographs and videos may be used for, but not limited to, social media, advertising, and publicity for this and future productions, usage will be at the discretion of Imagine Theatre Ltd and associated theatres. Photographs and videos will also be held for the theatre and Imagine Theatre's archive indefinitely. I understand that photographs and videos may be taken by the audience during the show and posted on social media and I give permission for this.

Should the child named above be successful in gaining a part in this production they will make a full contribution to the success of the pantomime by using their talents in dancing, singing and acting, as directed, within the production. They will attend **all** rehearsals and performances they are called for and adhere to all rules and instructions given and all production requirements regarding costumes, make-up and any other performance related matters. Imagine Theatre will issue a code of conduct declaration which I agree my child must adhere to. I understand that failure to do so may result in my child being withdrawn from the production.

Due to GDPR Data Protection Laws, Imagine Theatre Ltd will securely store relevant data and signed consent until the youngest child of the production reaches the age of 21. Please refer to Imagine Theatre Ltd.'s privacy policy for more detailed information.
www.imaginetheatre.co.uk/cookie-and-privacy-policy

Signed (parent / guardian)			
Name (block capitals)		**Date**	

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