

Number: _____

AUDITION FORM

Name _____ Age _____

Address _____ Height _____

City _____ Hair Color _____

State/Zip _____ Eye Color _____

Email _____

Parent (if under 18) _____

Email _____

Cell Phone () _____ Home Phone () _____

Best time to call _____

Roles you are interested in: _____

Are you willing to accept any role? _____ (yes/no)

If you do not get a speaking role are you willing to be in the show? _____ (yes/no)

CONFLICTS - (specific dates and times, including appointments, vacations, practices, etc.)

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

Are you interested in working on stage crew, props, or costumes? (Check all that apply)

- Stage Crew Costumes Usher Hair and Makeup
- Props Lights/Sound Set Design

Where did you hear about this audition? _____

PLEASE LIST PRIOR EXPERIENCE ON BACK OF FORM (or attach resume).

Include voice, dance, acting training and theatrical experience.

I understand that tech week rehearsal and performances are mandatory. (See attached calendar for dates) _____

Signature