Audition Number:



Audition Application:

Name:									
Parent Name: _	Parent Email:								
Address:									
Phone No.:	Alternate:								
Email:									
Age:	Height: Gender: M F					F			
	Shirt Size: Pants size: Dress Size: Shoe Size:								
Performance	e Experience:								
Name of Show		Name of Chara	cter	Production Group)	Year			
	Attach Resume of experience, raining/Education/V	-							
Circle one:	Soprano Alto	Tenor B	ass						
Dance Training: Yes No If, yes: How long? What Type?									
Special Skills:									
Is there specific	role you are interested in	being cast in?							
Will you accept a	any role? Yes No	Would you co	nsider play	ring the role of the o	opposite sex? Yes	s No			
Will you accept an ensemble role? Yes No Are you willing to play an understudy? Yes No									
Can you or others help with production (sew, paint, publicity, box office, stage hand, etc.)? (list names here)									

If you are not a cast r	nember would you be w	illing to help as a crew me	mber or stage manager	? Yes No No				
Other Applicable	Skills: STAGE MANAG	GER LIGHT BOARD	SPOTLIGHT	SPEACIAL EFFECTS				
RIGGING/FLYING	PROPS SEWING/COSTUMES		SET BUILDING	SET PAINTING				
FRONT OF HOUSE	PUBLIC RELATIONS	PHOTOGRAPHY	USHERING					
	al or other condition by phobias we should be	. ,	abetic? Asthmatic? Suff	er from serious allergies?				
		arsing anything now						
Please list any potential Scheduling Conflicts for rehearsals or performances below: Dates of conflicts Reason for conflicts								
How did you hear ab	out our Auditions? (Circ	le all that apply)						
Would you like to sig	AIL NOTICE OUR WEBS	ing list? No Yes	FACEBOOK OTHER					
	pick up for minors: (add	litional names on back)	12.					
Name			Phone number:					