



Audition Form

NAME: _____ PHONE: _____

ADDRESS: _____

CITY: _____ ZIP CODE: _____

PARENT/GUARDIAN NAME: _____ PHONE: _____

EMAIL: _____

GRADE: _____ SCHOOL: _____

AGE: _____ SEX: _____ HEIGHT: _____ WEIGHT: _____ HAIR: _____

Are you auditioning for: Male Roles: _____ Female Roles: _____ Either: _____

Rehearsals are held on weekday evenings and on weekends. ALL CONFLICTS MUST BE KNOWN AT AUDITIONS TO BE EXCUSED. **Place an X in the time slots for which you cannot be available and cannot work around.** Listed scheduling conflicts should include sports, clubs, church, trips out of town, classes and lessons including dance, voice, choirs, etc.

(pm)	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
5:30-6:00	_____	_____	_____	_____	_____
6:00-6:30	_____	_____	_____	_____	_____
6:30-7:00	_____	_____	_____	_____	_____
7:00-7:30	_____	_____	_____	_____	_____
7:30-8:00	_____	_____	_____	_____	_____
8:00-8:30	_____	_____	_____	_____	_____
8:30-9:00	_____	_____	_____	_____	_____

Other schedule conflicts:

Saturday / Sunday: _____

Any dates you will be unavailable (please list all): _____

Will you be available for any upcoming holiday weekends? Yes _____ No _____

If No please explain when you will be gone _____

Role desired: _____

Will you accept another role? Yes _____ No _____

Name: _____ Audition Number: _____

PERFORMANCE EXPERIENCE

Please include school or community plays, chorus, band, radio, TV, recitals, or other performance activities.

PLAY / EVENT	ROLE	ORGANIZATION

MUSICAL BACKGROUND

Do you sing? Yes ___ No ___ Vocal Range: Soprano ___ Alto ___ Tenor ___ Bass ___

Can you read music? Yes ___ No ___ Do you play an instrument? Yes ___ No ___

Musical training (class, teacher, etc.) _____

DANCE BACKGROUND

Dance Training (teachers and classes): _____

Tap ___ Jazz ___ Ballet ___ Gymnastics ___ Ballroom ___ Folk ___ Clog _____

Level of Ability: Dance Captain Material _____ Can Learn Quickly and Easily _____

Able to pick up a few Simple Steps ___ Two Left Feet _____

Do you have a special trick or talent (backflip, handstand, double dutch, etc.) Yes ___ No _____

Please Describe _____

DO NOT WRITE BELOW THIS LINE:
