

Audition Form 2019

Name: _____

Age: _____ Height: _____ Hair color: _____

Phone: _____ Email: _____

Address: _____

Parent/Guardian Name(s): _____

How did you learn of this audition: (newspaper/radio/website/flyer/friend, etc.): _____

Previous theatre experience (Attach separate sheet of paper if necessary):

Special skills or Talents (dancing, singing, musical instrument, etc.): _____

Why would you like to be involved with this production?

What role(s) are you most interested in being considered for?

Anything else the creative team should know about?

