

# 2019 Season Audition Form



Name \_\_\_\_\_

Phone # \_\_\_\_\_

email \_\_\_\_\_

MALE \_\_\_ FEMALE \_\_\_ AGE RANGE \_\_\_\_\_ HEIGHT \_\_\_\_\_

Which Show(s)/Role(s) are you auditioning for \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Would you accept different roles? Yes \_\_\_ No \_\_\_

Which Show(s)/Role(s) do not want to be considered for?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any schedule conflicts? Please list any concerns:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Would you be interested in our Adventure (Family) Series productions? Yes \_\_\_ No \_\_\_

If auditioning for a musical, what is your vocal range? Soprano/Alto/Tenor/Baritone

If auditioning for a musical, do you dance? Yes \_\_\_ No \_\_\_ Training? Yes \_\_\_ No \_\_\_

**Theatrical experience or training:** (Please list anything you think may apply or attach a resume/headshot)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_