



AUDITION APPLICATION – COMMUNITY SHOW (complete and bring to audition)

Please print clearly

| | | | | |
|--|--|--|--|-----------------|
| Name (first and last) | | Age | <input type="checkbox"/> 18 and older <input type="checkbox"/> Under 18 | Age if under 18 |
| If Under 18, Parent's Name (first and last) | | Parent's Daytime Contact Telephone # | | |
| Mailing Address | | City | | Zip |
| Cell Phone Number (applicant) (number to contact on days or evenings of scheduled rehearsals) | | Cell/Landline # (include name of parent/applicant) (number to contact days or evenings of scheduled rehearsals) | | |
| E-mail Address (applicant) | | Family E-mail | | |
| Part for Which You Are Auditioning | | | | |
| Previous theater production experience? (please list specifics; show, role, approx. show date) | | | | |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| Please list previous training in theater, dance, musical experience (please list below): | | | | |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| Other talents: (gymnastics, tap, musical instruments, accents, stage combat, etc.) | | | | |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| Rehearsals will generally be held during weekday evenings in May, June and July. Please list any conflicts you may have with rehearsals during those months below: | | | | |
| | | | | |
| <i>Sign below after reading the Cast and Family Requirements and Expectations</i> | | | | |
| Applicant's Signature | | Date | Parent's Signature if Under 18 | |