

## **AUDITION FORM**

Name:	De:	sired Role:		
Age:Heig	ght: Phone #	Email		
Please attach you	r headshot to the back of thi	s form.		
Please list previo	ous training and/or experie	ence:		
Voice: Teacher:		How Long?		
Dance:Teacher:		How Long?		
Acting:Teacher:		How Long?		
Please list previo	ous performance experienc	e (or attach a resume):		
Show	Role	Company	Year	
Please list the dat I can a  I can only attend Tuesdays fro	es you will be <u>ABLE</u> to atten attend ALL rehearsals a <u>on the following times:</u> am ();Thursday	ys from (); and Sa	aturdays from ()	
miss more than one	excused absence you decrease y 10te that if you miss a rehearsal	ly two unexcused absences for leading our chance of getting another lead roll it could affect what part of the scene	ole in a future STAR	
Performer	Performer's Signature			
Parent's Si	Parent's Signature			