

## **Spokane Valley Summer Theatre**

## **Audition Form**

Full Name			
DOB M	ale/Female (please circle)	Height	Weight
Email	Phone #		
Home Address			
Name of Parent or Guardian (if un	nder 18)		
Contact for Parent or Guardian -	Home # Cell #	Ema	ail
Name of Audition Song(s)			
Audition attire			
Show (s) you are auditioning for _			
Role (s) you are Auditioning for _			
Would you consider other roles? Would you accept an ensemble re CONFLICTS (Please list):			
MUSIC AND DANCE TRAINING	:		
Can you read music? YES NO Singing ability: NONE AMATEUR TRAINED (YEARS)			
Vocal range: BASS BARITONE TENOR ALTO SOPRANO			
Skill: BEGINNER INTERMEDIATE	ADVANCED		
Instruments you play:		Skill: BEGINNER	INTERMEDIATE ADVANCED
DANCE / MOVEMENT: BALLET_	_ TAP JAZZ CONTEMP/MOI	DERN HIP-HOP_	BALLROOM OTHER
Style (if Other):	# of Years: Skill L	evel: Beginner	INTERMEDIATE ADVANCED
Special Skills: stage combatjubaton twirling	JGGLINGACROBATICSCIRCUS_	CHEERLEADING	_GYMNASTICS
Other Skills to Note:			
OTHER OPPORTUNITIES WITH			
If not cast as a performer, would you be interested in working as backstage crew? YES NO			
Other Applicable Skills: LIGHT BO			
SEWING / COSTUMES SET BUILDING SET PAINTING USHERING PUBLIC RELATIONS  SOCIAL MEDIA PUPPETRY CHOREOGRAPHY DANCE CAPTAIN			