



Audition Form

Full Name _____

DOB _____ ☐ Male ☐ Female ☐ Non-binary Height _____ Weight _____

Email _____ Phone # _____ Cell ☐

Preferred contact method ☐ Email ☐ Phone call ☐ Text (SMS)

Home Address _____

Name of Parent or Guardian (if under 18) _____

Contact for Parent or Guardian Home # _____ Cell # _____ Email _____

Name of Audition Song(s) _____

Audition attire _____

Show (s) you are auditioning for _____

Role (s) you are Auditioning for _____

Would you consider other roles? ☐ YES ☐ NO

Would you accept an ensemble role? ☐ YES ☐ NO

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/MODERN ☐ HIP-HOP ☐ BALLROOM ☐ OTHER

Style (if Other): _____ # of Years: _____ Skill Level: ☐ BEGINNER ☐ INTERMEDIATE ☐ ADVANCED

Special Skills: ☐ STAGE COMBAT ☐ JUGGLING ☐ ACROBATICS ☐ CIRCUS ☐ CHEERLEADING ☐ GYMNASTICS ☐ BATON TWIRLING

Other Skills to Note: _____

OTHER OPPORTUNITIES WITH US:

If not cast as a performer, would you be interested in working as backstage crew? ☐ YES ☐ NO

Other Applicable Skills:

☐ LIGHT BOARD ☐ SPOTLIGHT ☐ SPECIAL EFFECTS ☐ RIGGING / FLYING ☐ PROPS ☐ SEWING / COSTUMES ☐ SET BUILDING
☐ SET PAINTING ☐ USHERING ☐ PUBLIC RELATIONS ☐ SOCIAL MEDIA ☐ PUPPETRY ☐ CHOREOGRAPHY ☐ DANCE CAPTAIN