

# Audition Application Form

NAME: \_\_\_\_\_

HOME PHONE NUMBER: \_\_\_\_\_

CELL NUMBER: \_\_\_\_\_

May we use texting? \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

If 18 years of age or younger, please fill out the following:

PARENT(S)/GUARDIAN(S) NAME(S): \_\_\_\_\_

CELL PHONE NUMBER: \_\_\_\_\_

WHAT PART DO YOU SING? SOPRANO \_\_\_\_\_ ALTO \_\_\_\_\_ TENOR \_\_\_\_\_ BASS \_\_\_\_\_

IS THERE A ROLE THAT YOU ARE INTERESTED IN? IF SO, WHICH? \_\_\_\_\_

(Remember this is just for our information and does not guarantee that you will receive this role)

PREVIOUS EXPERIENCE: (Please list the last five shows that you have been a part of on or off stage)

<b>Show title</b>	<b>Part or Role</b>	<b>Date of performance</b>	<b>Organization</b>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

OTHER EXPERIENCE (i.e. classes, music, workshop, etc.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

AFTER REVIEWING THE SCHEDULE, DO YOU FORESEE ANY SCHEDULING CONFLICTS?

\_\_\_\_\_

\_\_\_\_\_