



# \_\_\_\_\_

**Audition Registration**

**Form**

Show you are auditioning for: \_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address #1: \_\_\_\_\_ Email Address #2: \_\_\_\_\_

Phone Preferred: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Age: \_\_\_\_\_ Height: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Gender: (M) (F)

Are you auditioning for a specific role? \_\_\_\_\_ If yes, which role? \_\_\_\_\_

Would you be willing to accept another role? \_\_\_\_\_

Vocal range (please circle): Soprano Alto Tenor Baritone Bass Unknown

Do you play a musical instrument? \_\_\_\_\_ Do you read music? (Y) (N)

Do you have dance experience? (Y) (N) If Yes, which styles? \_\_\_\_\_

Would you be interested in working on the production in another capacity? (Y) (N)

If yes, please circle your area of interest: Director Assistant Sound Stage Crew Props

Costumes Makeup Box Office Lights Other \_\_\_\_\_

Please list your recent experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*Please attach a resume and headshot to the back of this registration form