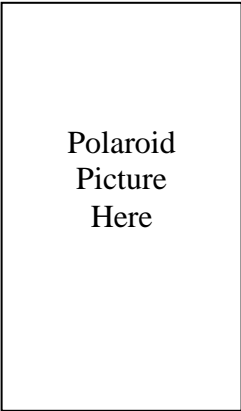




# YOUTH AUDITION SHEET

Audition #



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

Age: \_\_\_\_\_ Date Of Birth: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair Color: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

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

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

E-Mail Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell/Emergency Phone: \_\_\_\_\_

List any roles you are specifically auditioning for \_\_\_\_\_

Are there any roles which you would not accept? \_\_\_\_\_

Please review rehearsal and performance schedule and list any anticipated conflicts with rehearsal and production schedules:

\_\_\_\_\_  
\_\_\_\_\_

Please list any "special skills" (Examples: Juggling, gymnastics, stage combat, musical instruments, etc.)

\_\_\_\_\_

- If you are not cast, are you interested in being on our crew?

Y                      N

- If you are not cast, are you interested in helping us with promotion and marketing?

Y                      N

List any past experience or training (Use back of page or attach résumé)

Show/Class	Role	Date	Theatre/School

I understand that any successful production depends on commitment, cooperation and teamwork. If I am selected for this performance class, I will make every effort to be supportive and cooperative and do my part to make this show a success. **I understand that excessive absenteeism, poor behavior and attitude or an unwillingness to give my all may result in dismissal from the production.**

PARENT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

STUDENT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_