

**CURTAIN CALL
Audition Form**

Please PRINT CLEARLY and Complete All Sections. Attach Resume/Headshot if available.

List ALL Rehearsal Conflicts On Reverse Side

Audition Number: _____ **Audition date:** _____

Name: _____ **Pronouns:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Home Phone: _____ **Cell Phone:** _____ **E-Mail:** _____

Occupation _____ **Employer** _____

Parent Contact: _____ **Phone:** _____ **E-Mail:** _____

Suit Size _____ **Dress Size** _____

Height: _____ **Weight:** _____ **Age Range:** _____

Hair Color: _____ **Eye Color:** _____ **Date of Birth:** _____

Your Performance Experience (or attach resume):

<u>Year</u>	<u>Production</u>	<u>Theater</u>	<u>Role</u>	<u>Director</u>

Your Special Skills and Training (or attach resumé):

Role(s) For Which You Would Like to be Considered: _____

Will You Accept Another Role? Yes _____ No _____

Will You Accept Ensemble? Yes _____ No _____

Please let us know which other areas of the production you would like to help with. (circle choices)

(If not cast, would you still like to work in any of the following areas?) _____ Yes _____ No

- | | | | | | |
|----------------------|--------------|------------|-------------|------------------|-----------|
| Set Construction | Painting | Wardrobe | Properties | Lights | Publicity |
| Costume Construction | Make-Up | Box Office | Ushering | | |
| Musician | Running Crew | Playbill | Advertising | Other (explain): | |

How did you learn about these auditions? (please be specific) _____

Can you read music? _____

**I will accept being an understudy
or being double-cast: Yes _____ No _____**