

#\_\_\_\_\_ (Director Use Only)

## TO ENSURE YOU ARE NOTIFIED REGARDING CASTING DECISIONS PLEASE PRINT LEGIBLY.

NAME:\_\_\_\_\_PHONE:\_\_\_\_\_EMAIL:\_\_\_\_\_

HEIGHT:\_\_\_\_\_\_ AGE:\_\_\_\_\_ HAIR/EYE COLOR: \_\_\_\_\_

IF UNDER 18 INCLUDE THE NAME AND CONTACT INFORMATION OF PARENT/GUARDIAN: NAME:\_\_\_\_\_\_ PHONE:\_\_\_\_\_\_ EMAIL:\_\_\_\_\_\_

**CONFLICTS** 

PLEASE REVIEW THE AUDITION FACT SHEET AND LIST ANY CONFLICTS DURING PERFORMANCES OR REHEARSALS

Backstage volunteers are welcome please circle if you are interested in: SET DESIGN – BACKSTAGE CREW – COSTUME/MAKEUP

## **PERFORMANCE EXPERIENCE (If providing resume mark SEE ATTACHED)**

Name of Show	Your Role	Name of Company
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F YOU HAVE INTEREST IN A P	ARTICULAR ROLE PLEASE INDICATE:	
WILL YOU ACCEPT ANY ROLE	THAT IS OFFERED?:	
Have you recently auditioned	or do you plan to audition for anoth	per show in the next 60 days?

\*\*\*\*\*\*Please use reverse side of paper for additional information you could not fit on this page\*\*\*\*\*