



Student Name _____ *Class: M/W T/Th

Grade _____ Age _____ Height _____ Hair Color _____

Parent email address: _____

Previous Theatrical Experience

Play/Musical	Character	Organization

Previous Music/Voice Experience:

Do you take private voice lessons? _____ How Long? _____

Are you in Choir? _____ How long? _____ Vocal Range _____

Special Skills: _____

Dance Experience: _____

I am interested in auditioning for _____ Anything

Cast members will not be allowed to miss more than 5 rehearsals over the course of the semester. Please list any potential conflicts or miss days below:
