

(staple
picture
here)

MUSICAL AUDITION FORM

NAME: _____

ADDRESS: _____

EMAIL: _____ PHONE: _____

EXPERIENCE

Production	Role
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Part(s) for which you'd like to be considered? _____

CONFLICTS: List below the regular conflicts that would affect your attendance at practice:

	MON	TUES	WED	THURS	FRI	SAT
After noons	_____	_____	_____	_____	_____	_____
Evenings	_____	_____	_____	_____	_____	_____

Is there anything else the director(s) should know about conflicts: trips, weddings, etc?

(OFFICE USE ONLY)

Range: _____

Vocals	1	2	3	4	5
Inflection	1	2	3	4	5
Tone	1	2	3	4	5
Dancing	1	2	3	4	5