

# Colonial Center Community Theater

## AUDITION FORM

Name _____	Age _____	Grade _____
Address _____		
City _____	State _____	Zip _____
School _____		
Home Phone _____	Email _____	
Alternate Phone _____	Height _____	Weight _____
Parent's Names _____		

Role Desired \_\_\_\_\_ Would you accept any role? \_\_\_\_\_

Training/Education: \_\_\_\_\_

Previous Performance Experience—List all information, most recent first:

SHOW:	ROLE:	PLACE:	YEAR:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List Any Previous Stage or Crew Experience (Most Recent First)

SHOW:	ASSIGNMENT:	YEAR:
_____	_____	_____
_____	_____	_____
_____	_____	_____

Briefly list any vocal/dance training you have had.

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

List any specialty talents (juggling, gymnastics, band, etc.).

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

No. of class sessions you have taken at the Colonial Center or other venues: \_\_\_\_\_

No. of times auditioned at the Colonial Center or other venues: \_\_\_\_\_

List specific times you are available and any potential conflicts with rehearsals or performances.

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

Please list any additional information and/or explanations from previous answers.

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