

AUDITION FORM

Please complete and hand in at audition with your resume (if you have one) and photo (required).



Name: _____

Address: _____

State: _____ Zip: _____ School: _____ Grade: _____

Your Home Phone #: _____ Birthdate: _____ Age: _____ Sex: ☐ M ☐ F Height: _____

Parent's Name: _____

Parent's Cell#: _____ Parent's email: _____

How did you hear about us? _____

Voice Type (Mark one): ☐ Soprano ☐ Mezzo ☐ Alto ☐ Tenor ☐ Baritone ☐ Bass ☐ Unknown

Previous Acting/ Dancing /Singing/ Theater Experience and Formal Training - Check all that apply
(feel free to use the back of the form if you need more space):

☐ Resume Attached (optional)

☐ Theater Experience. Please list on back using the following format if not on resume:

Date/Year	Play/Show Name	Role	School/organization	Director

☐ Formal Training-Please specify on back of form if not on resume: Type years, instructor, and school

☐ Special Talents? Please specify on back of form if not on resume (e.g., gymnastics, juggling, play an instrument, magic.)

 PLEASE LIST ALL CONFLICTS YOU HAVE BETWEEN NOW AND THE PERFORMANCE DATES AND WHETHER THEY ARE FLEXIBLE OR NOT 

List any parts/roles you are particularly interested in:

D
M
S

This space is for JPAS use only
