

## PLEASE DOWNLOAD AND COMPLETE THIS FORM ATTACH IT TO THE EMAIL or BRING A COPY WITH YOU TO THE AUDITION

NAME:	PERSONAL PRONOUNS:					
EMAIL ADDRESS:					HEIGHT:	
MOBILE NUMBER: _					EYE COLOR:	
MAILING ADDRESS:	:				HAIR COLOR:	
WILL YOU ACCEPT A IF YOU ANSWERED NO, F	<del>-</del>					
IF NOT CAST, ARE YO	 DU INTERESTED	IN WORKING	IN A VOLUNT	EER/CREW PO	 SITION?	 S □ NO
IF YOU ANSWERED YES  PLEASE LIST PER	Stage Managem	nent ∐Assi □Futu	istant Director ure Director	∐Lit Team □Usher	PERIENCE REQUIRED Box Office Board Meml	
REHEARSALS	II he 4-5 rehears	sals total for t				
<ul> <li>Basic schedule wi</li> <li>Please note any c works for those w</li> <li>Tech/Dress: Stage</li> </ul>	onflicts or sched ho are cast.	dule concerns o	on your auditio	on form. Your d	irector will cred	ate a schedule that
<ul><li>Please note any c works for those w</li><li>Tech/Dress: Stage</li></ul>	onflicts or schec ho are cast. ed Readings will	be the mornin	on your auditions of the perfo	on form. Your dormance, gener	irector will cred ally called at no OU CAN N	oon.  OT REHEARSE
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<ul> <li>Please note any c works for those w</li> <li>Tech/Dress: Stage</li> <li>PLEASE IDEN</li> </ul>	onflicts or sched who are cast. ed Readings will TIFY ANY RI PLEASE NO TUES	be the morning  ECURRING  TE MORN  WED  Morning	on your auditions of the performance of the perform	on form. Your don form. You for the for the form. You for the form. You for the form. You for th	irector will cred ally called at no OU CAN N OR EVENING SAT  Morning	onte a schedule that soon.  OT REHEARSE