

# AUDITION CARD



Show Auditioning For: \_\_\_\_\_

I will accept **ANY** role, including

Ensemble

I will **ONLY** accept the role(s) of

\_\_\_\_\_

**Please PRINT clearly**

Name (as you wish it to appear on program) \_\_\_\_\_

Pronouns (optional) \_\_\_\_\_

Phone # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_

E-Mail: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Height: \_\_\_\_\_

Background information: Please answer the following yes or no

Do you have reliable transportation to and from rehearsal? \_\_\_\_\_

If so, what? (ie: parents, friend, car, bike, etc.)? \_\_\_\_\_

Do you take any medications, if so, what? \_\_\_\_\_

Please list any disabilities, medical problems, allergies, or special accommodations needed:

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

**CLASS/WORK SCHEDULE**

Please fill out your work and class schedule including class name and room number. Be sure to include all outside commitments (church, shows, chorus, other schools, etc...)

8-9am	Mon	Tues	Weds	Thurs	Fri	Sat	Sun
9-10am							
10-11am							
11-12pm							
12-1pm							
1-2pm							
2-3pm							
4-5pm							
6-7pm							
7-8pm							
8-9pm							
9-10pm							
10-11pm							