



AUDITION FORM

Name: _____ Desired Role: _____

Age: _____ Height: _____ Phone # _____ Email _____

Please attach your headshot to the back of this form.

Please list previous training and/or experience:

Voice: _____ Teacher: _____ How Long? _____

Dance: _____ Teacher: _____ How Long? _____

Acting: _____ Teacher: _____ How Long? _____

Please list previous performance experience (or attach a resume):

Show	Role	Company	Year

Attention Performers: The rehearsal schedule is structured around your attendance. Please list the dates you will be ***ABLE*** to attend rehearsals:

_____ I can attend ALL rehearsals

I can only attend on the following times:

___ Tuesdays from (_____); ___ Thursdays from (_____); and ___ Saturdays from (_____)

Please list all conflicts or vacation times: _____

Once the rehearsal schedule has been completed only two unexcused absences for leading roles will be allowed. If you miss more than one excused absence you decrease your chance of getting another lead role in a future STAR production. Please note that if you miss a rehearsal it could affect what part of the scene you will perform in, including ensemble performers.

 Performer's Signature _____