Breaking Up is Hard to Do Audition Form

Audition #:

NAME:							
PARENT/GUARDIAN NAME/							
ADDRESS:							
	y): PHONE (cell):						
E-MAIL:	AGE/GRADE: HEIGHT:						
Voice Part: Soprano / Alto	/ Tenor / Bass V	ocal Range:					
Vocal Training or Experience							
Do you read music?	For this audition I a	am singing:					
Dance Training or Experience	ce:						
Theatrical Training: List 5 of your most recent st							
-		-					
Production	Theatre	Role	When				
2.							
3.							
4. 5.							
Is there anything you would	like the director to kr	now that is not inclu	uded on this form?				
Availability: 1. I am willing to accept any	role: YES or NO (<i>pleas</i>	e circle one)					
2. If you answered "no" to qu	uestion 1, please list wh	nich roles you are w	illing to accept:				

Please list any conflicts from April 1st-June 9th April

SUN	MON	TUE	WED	THU	FRI	SAT
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

May

SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

June

SUN	MON	TUE	WED	THU	FRI	SAT
						1
2	3	4	5	6	7	8
9						