

**Audition Form for**  
**The Very Persistent Gappers of Frip**  
**Broadview Heights Spotlights Theater**

<b>For Director's Use:</b> # _____ Vocal Range _____ Available for Callbacks? _____ Cast as _____
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Print.

**Contact Information**

Name:		Age:	
Mailing Address:		City/State/Zip:	
E-mail Address:			
Home Phone:		Cell Phone:	

**Physical Attributes**

Hair Color:		Hair Length:	
Height:		Weight:	
Glasses?		Contacts?	
Are you willing to change the color and/or length of your hair?			

**Previous Experience** (If you have a resume, please attach)

Theater (list only previous four):

<u>Show</u>	<u>Role</u>	<u>Theater</u>	<u>Director</u>

Briefly describe any vocal/choral singing experience. Which part(s) are you most comfortable singing?

Briefly describe any dance training/experience. Include style and number of years.

Do you play any instruments?

Other Special Skills:

Name \_\_\_\_\_

In which role(s) are you interested? \_\_\_\_\_

Will you accept another role if offered? \_\_\_\_\_

What else should the director know about you? (Please be brief.)

On the calendar below, please clearly place an "X" on any conflict dates you have. No rehearsals will be scheduled on dates that are shaded gray.

<b>Sunday</b>	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>	<b>Saturday</b>
			May 26	May 27	May 28	May 29
May 30	May 31	June 1	June 2	June 3	June 4	June 5
June 6	June 7	June 8	June 9	June 10	June 11	June 12
June 13	June 14	June 15	June 16	June 17	June 18	June 19
June 20	June 21	June 22	June 23	June 24	June 25	June 26
June 27	June 28	June 29	June 30	July 1	July 2	July 3
July 4	July 5	July 6	July 7	July 8	July 9	July 10
July 11	July 12	July 13	July 14	July 15	July 16	July 17
July 18	July 19	July 20	July 21	July 22	July 23	July 24
July 25						

By signing below, you acknowledge that the information on this form is truthful and accurate. Please understand that the rehearsal process is a very time sensitive.

**If cast, additional conflicts not noted on the above calendar CAN NOT be accommodated.**

Signature \_\_\_\_\_ Date \_\_\_\_\_