



Audition Number

Second Suburb Players Audition Form

PERSONAL INFORMATION

Name: _____ Age: _____ Birthday: _____

Street Address: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Height: _____' _____" Hair Color: _____ Eye Color: _____

T-Shirt Size: X-Small / Small / Medium / Large / X-Large / XX-Large / XXX-Large

Vocal Range: _____

Desired Role(s): _____

If not considered for a lead, will you accept a small speaking role? Yes / No

If not considered for a lead or a small speaking/singing role, will you still be interested in performing in the show? Yes / No

What areas would you be interested to help with during the show:

Set Design Paint Crew Props Advertising Costumes

List any conflicts during the rehearsal process: _____

I will be available for all performances and for all dates of technical week: Yes / No

(If you are not available for these mandatory dates, it most likely reflects the role you receive or play a role in whether you are cast in the show. However, please stay involved with the other areas of theatre, which are just as important towards putting on a show.)

-----Please do not write below line-----

Song: _____ Monologue: _____

Vocal Ability:

Vocal Range:

Prosody:

Movement:

Call Back needed? Yes / No

Roles Considered:

