Ten Minute Play Festival Audition Form

| Name: Age: Phone number: |
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| Please list any theatrical experience you may have. You don't need to have any, if that happens to be the case. |
| 2. Why are you interested in participating in the Ten Minute Festival? |
| 3. Would you consider playing a role of the opposite gender? |
| List any special talents you may have: juggling, stilt walking, magic, playing dead, etc, etc, etc |
| 5. Please list all conflicts you have: |
| 6. Are you able to be present during all dress rehearsals and performances: October 14-20? |
| 7. Are you willing to to perform in more than one ten minute play? |
| 8. For 12 year olds: Are you willing to or do you prefer to perform in the younger plays Walls and Bridges, and Pickle Sandwich? |