## *The Complete Works of William Shakespeare (Abridged)* Audition Form

Name:		Town:
Age:	Grade:	School:
Parents' names:		
Phone number:		Email:

Please list past theatre/performing experience (use back if necessary):

Is there a particular character in *this production* that interests you and <u>*WHY*</u>? (use back if necessary)

Are you comfortable kissing another actor on stage?

Are you comfortable playing a role of the opposite gender?

Please list <u>*ALL*</u> conflicts between now and May 12, 2014. Please note that all actors must be at all rehearsals/performances from May 12-18.