

Annie Audition Form

Name: _____

Age: _____ Height: _____ Hair color: _____

Phone: _____ Email: _____

Address: _____

Parent/Guardian Name(s): _____

How did you learn of this audition: (newspaper/radio/website/flyer/friend, etc.): _____

Previous theatre experience (Attach separate sheet of paper if necessary):

Special skills or Talents (dancing, singing, musical instrument, etc.): _____

Why would you like to be involved with this production?

What role(s) are you most interested in being considered for?

Please see rehearsal schedule and let us know of any conflicts at this time:

Anything else the creative team should know about?

Do you have a cast preference? Red _____ Blue _____ **Please note due to the size of the production we may not be able to accommodate cast preference but will keep in in mind when casting if possible.**