## Starlight Traditions Audition Form



Day/number:	
Appt Time	
Actual Time	

## Please fill out this form completely Name Phone(\_\_\_\_\_) Age\_\_\_\_Email Address\_\_\_\_ School (if student)\_\_\_\_ Home Address City\_\_\_\_\_State\_\_\_\_Zip Code\_\_\_\_\_ Hair Color\_\_\_\_\_\_Height\_\_\_\_\_\_Weight\_\_\_\_\_ Will you accept other roles? **PRODUCTION** CHARACTER PREFERENCE CONFLICTS PLEASE LIST ANY CONFLICTS YOU HAVE WITH THE PUBLISHED REHEARSAL SCHEDULE. HAVING CONFLICTS WITH MUST DATES SEVERELY AFFECTS YOUR POTENTIAL TO BE CAST FOR THAT SHOW! **A Christmas Story**

Please list three roles that you have performed which you leel best reflect your range				
Role	Play	Theatre	Year	

Physical handicaps or restrictions							
What Acting training have you had, if any?							
List any special skills that you have that you would bring to our production:							
Are you willing to wear any costume we may or may not put on you (circle)? Yes No							
If no, what restrictions/reservations do you have?_							
What musical instruments do you play?							
How did you hear about our auditions?							
What is your favorite holiday?							
How much food are you willing to bring to each rehearsal ?							
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If you were to design a new logo for Starlight <b>Traditions</b> , what would it be (Draw it in the space below)?	If you are interested in volunteering at RVCStarlight, in what capacity would you be willing? (Circle any)						
	Box Office	Set Construction	Costume Shop				
	Concessions	Usher	Backstage				
		Control	Zucinduge				