

Austin High School Theater Department Audition Form

PLEASE PRINT

Name: _____ Grade: _____

Phone: _____ Email: _____

Recent Theater Experience:

Date	Show	Role/Responsibility
_____	_____	_____
_____	_____	_____
_____	_____	_____

Class Schedule

Period	Class Title	Teacher
0	_____	_____
1	_____	_____
2	_____	_____
3	_____	_____
4	_____	_____
5	_____	_____
6	_____	_____
7	_____	_____
8	_____	_____

Role for which you are auditioning: _____

Are you willing to accept another role? ___Yes ___No

Are you willing to cut your hair to fit the character? ___Yes ___No

Are you willing to color your hair to fit the
time period and character? ___Yes ___No

Indicate by checking below, the areas in which you would like to help. Previous experience is not required.

Set:		Musician:	
Building set	___	Orchestra	___
Design	___	Pianist	___
Painting/art	___	Soloist	___
Props:		Hospitality:	
Work show	___	Show Chairman	___
Finding props	___	House Manager	___
Costumes:		Ushering	___
Design		Refreshments	___
Sewing		Box Office:	
Dresser	___	Make-up	___
Hair	___	Before School	___
Stage:		Show Night	___
Stage Manager	___		
Script Holder	___	Miscellaneous:	
Assist. Stage Manager	___	Publicity Posters	___
Technical:		Publicity Mailings	___
Lighting:	___		
Sound:	___		
Special Effects	___		

CONFLICT SCHEDULE

If you are cast in a role for this production, you will be expected to attend after school rehearsals. **If you have any other extracurricular, tutoring, church, or family activities that may interfere with after school rehearsals, they must be listed below.**

Date	Reason
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____