



SEUSSICAL AUDITION FORM

Name _____ Age on 6/11/10 _____

Address _____ Height _____

City _____ Zip _____ Weight _____

Parent/Guardian Name _____

Primary Phone # _____ Cell Phone # _____

Parent's Email Address _____

Performer's Email Address _____

Specific role you are interested in: _____

If not cast in this role, will you accept another role(s)? _____

Or still be in the ensemble? _____

Please list any conflicts during the production schedule that you are aware of at this time (June 11 thru 27 including Saturdays June 12, 19, 26) (e.g. Graduation June 12)
Performance Dates are Fri, June 25 8PM, Sat June 26 2 & 8PM and Sun June 27 2PM:

Please list the last 3 performances you were in and where. (or attach resume)

- 1) _____
- 2) _____
- 3) _____

List any formal Dance, Theater, or Vocal training.

Special skills (juggling, gymnastics etc...) _____

Please do not write below this line (Production Staff Use Only)