



Audition Form for _____ **Date:** _____

(Fill in – Requested Event or Performance)

Name _____ Mailing Address _____

City _____ State _____ Zip Code _____ Email _____

Parent Name (for minors) _____ Parent Email _____

Telephone: Home _____ Work _____ EXT _____ Cell _____

Male _____ Female _____ Eye Color _____ Hair Color _____

Birth Date _____ Age _____ Height (ft/in) _____ Weight (lbs) _____

List any experience or training you have had involving acting, singing, and/or dance: [ATTACH PHOTO/RESUME PLEASE]

Role(s) you are interested in: _____

(Would you accept any other role? Yes No

Vocal Range (please circle): Soprano Second Soprano Alto Tenor Baritone Bass

THIS IS VERY IMPORTANT! *CAST MEMBERS ARE EXPECTED TO BE AT ALL REHEARSALS*

List any activities, dates, or involvement of any kind in jobs, sports, school, family, or church that would make it difficult or impossible to attend rehearsals.

Explain: _____

Photo Release for Minors (if under 18)

The Lower Shore Performing Arts Company has my permission to use my child’s photograph publically to promote the event. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Parent/Guardian’s signature: _____ Date _____

Parent/Guardian’s Name: _____

Costumer Notes:

Measurements: Bust/Chest _____ Waist _____ Hips _____ Neck to waist _____

Waist to knee _____ Shoe size _____

Contact: mail@lowershorepac.org

Contact: www.lowershorepac.org