



Audition Form 2018-2019

The Everett Theatre, Middletown, DE

Please write in the show or shows you are auditioning for _____

(Age 7-18yrs.old) All ages

Full name (as you want it in the program) _____

Address _____ Cell phone _____ Parents phone _____

Email _____ Parents email _____

Age _____ Height _____ Eye Color _____ Hair Color _____

T-shirt Sizes: circle one C MED CLG AS AMED ALG AXL AXXLG

Role you are auditioning for 1st choice _____

Will you accept another role? Y N 2nd choice _____ 3rd choice _____

Vocal range Soprano Mezzo Sop. Alto Tenor Bass Baritone

Voice lessons _____

Dance: Do you dance Y N Dance experience _____

Do you want a speaking role Y N

Previous roles you have portrayed, more room on the back of the form.

Additional training and education:

Monologue _____ Vocal selection _____

Special skills _____

Measurements:

Chest/Bust Waist Hip Outseam

Hat Neck Sleeve size Inseam

Shoulder to Shoulder Nape to waist Nape to floor

Directors notes: (5 being the best)

Voice quality 5 4 3 2 1 Director notes:

Pitch 5 4 3 2 1

Diction 5 4 3 2 1

Acting Ability 5 4 3 2 1

Movement 5 4 3 2 1

Signature | Parent: _____ Date: _____