

Valley Musical Theatre Rising Stars The Phantom Tollbooth Jr 2020

Audition #

CAST Audition Form

Please complete this form, sign the cast expectations/volunteer sheet, and consult the show calendar for conflicts prior to auditions.

Name _____ Age _____ Gender _____

Address _____ City / Zip _____

Home Phone _____ Cell Phone _____

e-mail _____ Do you check your email daily? _____

Any medical concerns: _____

For those under 18:

Parent/Guardian Name(s) _____

Home Phone _____ Work _____ Cell _____

E-mail _____ Do you check your email daily? _____

Do you read music? Yes _____ No _____ Just learning _____

Vocal Range (Circle): Soprano Mezzo Alto Tenor Baritone Bass Not sure

Singing/Choral/Dance Experience: _____

Theatre/Acting Experience: _____

Special skills/interests/hobbies/accents: _____

Role most interested in: _____ Will you really accept any role*? _____

(* This information will not influence your audition, but please be honest - we would rather know your plans, expectations, up front than have you quit later on.)

List known conflicts (comparing your schedule with the provided show calendar, continue on back of this sheet if more space is needed)