

Audition #: _____

THE MUSIC MAN AUDITION FORM

NAME: _____
 First Last

PHONE: (_____) - _____ - _____

E-MAIL: _____

GRADE: _____ AGE: _____

Please list your previous experience:

Show Title/Theatre Company

Role(s)

_____	_____
_____	_____
_____	_____
_____	_____

Special Skills: _____

Blocking and Dance rehearsals will be Tuesdays and Thursdays from 4:00pm – 6:00pm, and there will be a few music rehearsals on Mondays

I have no outdates.

I am not available on:

_____	_____
_____	_____

**Please staple a recent picture of yourself to this form.
Thank you for auditioning! Break a leg!**