Audition #: _____

FREAKY FRIDAY 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 <u>not</u> available on:**

_____ _____

_____ _____

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