








# BARRE PLAYERS

## AUDITION INFORMATION FORM


 PLEASE  
**PRINT**  
LEGIBLY



Do not  
write in  
this box.


 Name		Age Range	
 Address			
 City		State	ZIP
 Home Phone		 Cell Phone	
 Email Address			

 Please specify previous theatrical or other performing arts experience, if any.


Production	Your Role	Theater / Venue	Year


 If you have a preference for a particular role, please specify.  
Would you consider a different role, if offered?  Yes  No

 Specify your vocal range, if known. (For musical productions only)	 Have you had any dance training? <input type="checkbox"/> Yes <input type="checkbox"/> No (For musical productions only)
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 If you are not selected for a role in the cast, would you consider participating on the production team?  Yes  No  
Please check all categories that may interest you...

Stage Crew  Tech Crew  Publicity  Costumes  Set Construction  Scenic Artist  Box Office  
 Other (please specify)

 Please specify your general schedule of availability for rehearsals.

 Please specify any anticipated conflicts with the published rehearsal schedule (if available).

 Director's Notes