

Oakwood Summer Theatre



Audition Sheet



Name: _____ Date of Birth: _____ Age: _____

Height: _____ Weight: _____ Hair Color: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ E-mail: _____

Work/Cell

Home

Parent/Guardian Name (Please Print) _____

Please List Most Recent Acting/Theatrical/Artistic Experience

| Show/Production | Part/Role | Company/Organization | Date |
|-----------------|-----------|----------------------|------|
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List Any Scheduling Conflicts (Vacations, Work, Social Engagements, etc)

| Monday | Tuesday | Wednesday | Thursday | Friday |
|--------|---------|-----------|----------|--------|
| | | | | |

Vacation Date: _____

STOP!! DO NOT WRITE BELOW THIS LINE

For Directors Use Only

| Voice Range | Reading Ability | Characterization | Stage Presence | Role Consideration |
|-------------|-----------------|------------------|----------------|--------------------|
| | | | | |

Other Comments: _____

