



Student First Name _____ Student Last Name _____

Grade _____ Age _____ School _____

Student Email _____ Student Cell _____

Parent First Name _____ Parent Last Name _____

Address _____ City _____ Zip _____

Parent E-mail _____

Parent Cell Phone _____

Parents - Are you on Facebook: YES NO (we use FB private pages to disseminate information)

Rehearsal Schedule:

9/6, 20

10/4, 18

11/1, 15, 29

12/6 Dress Rehearsal

12/8 Concert

Conflicts– please list all conflicts that might keep you from attending any rehearsals from now until the concert date.

Previous Experience if applicable – summer camps, dance classes, school classes etc..

Tell us if you have any special talents that may come in handy.

Thank you for auditioning. We will contact you via email to let you know either way, if you have or have not been cast in the show.

Please check our website and FB page for more auditions.

Thank you again for participating today.