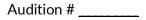
OREGON COMMUNITY THEATRE



Audition/Contact Information



Please fill out as much of the requested information as possible or check the appropriate choice where applicable. Age: _____ Name: Height: ft in Eye Color: City, State, Zip: _____ Hair Color: Cell Phone: Gender Identity: Pronouns: Grade Completed: **Previous Performance Experience or Roles: Role You Are Auditioning For:** First Choice: Second Choice: Third Choice: If not cast in one of these roles, would you accept another role? Yes____ No____ This Section is for Musicals Only **MUSIC:** Audition Song: Can you read music? Yes____ No____ Voice: Bass_____ Tenor____ Baritone____ Alto____ Soprano____ Instruments you play: **DANCE / MOVEMENT:** Skill Level Options: B - Beginner I - Intermediate A - Advanced N - N/A Ballet Tap Jazz Contemporary/Modern Hip-Hop Ballroom Ballroom If not cast in a role, would you accept an ensemble role? Yes_____ No____

ARE YOU CURRENTLY PERFORMING IN OR REHEARSING FOR ANYTHING NOW? Please note the show and schedule below:	
ARE THERE ANY POTENTIAL SCHEDULING CONFLICTS YOU'RE CURRENTLY AWARE OF? Please list conflicts below:	
HOW DID YOU HEAR ABOUT THIS AUDITION?	
Billboard E-Mail Notice Friend Facebook Instagram Our Website	
Newspaper Which One:	
OtherExplain:	
Emergency Contact:	
Name:	
Cell Phone:	
Relationship:	
Parent or Guardian Information (if under 18):	
Name:	
Cell Phone:	
Email Address:	
Relationship:	

Thank you for your interest in our production! We appreciate you sharing your talent with us and look forward to the opportunity to work with you.