



Audition Form

Lobby Hero

Audition Date:				Audition # (for theater staff use only):							
Specify role(s) preferred below:				Willing to accept any role (circle one)?		Yes	No				
				Age:		Gender (circle one):					
				Height:		Weight:		Female		Male	
				Hair Color:		Eye Color:					
				Please circle below any physical characteristics you <i>are</i> willing to change if the role dictates:							
				Hair Color		Hair Length		Cut/Grow Beard/Moustache (male)			
Last Name:			First Name:								
Address:			City:		Zip:						
Cell Phone:		Home Phone:		Work Phone:							
Email Address:				Include you in our email list for future auditions? (circle one)		Yes	No				
Can you ensure transportation to and from rehearsals and performances? (circle one)						Yes	No				
If not cast, in what other way(s) would you like to help with the production, if any?											
Please list any allergies of yours that we need to know about (may continue on back).											
List any training you have had in acting, voice, dance, or musical instruments. You may continue the list on the back of this form and/or attach a resume and headshot, if you wish.											
Play Title, Production Name, or Skill			Role (if Play)		Producing Organization/Teacher		Year				