

Please
Print
Clearly

EXAMPLE

MUST BE COMPLETED AT AUDITION

Audition Application



Name _____ Age _____ M/F _____ Date _____

Address _____
First Last

Phone _____ School _____ Grade _____
Number & Street City Zip

Alternate Phone _____ How did you hear about auditions? _____

Parent/Guardian Name(s) _____

E-mail address (print clearly) _____

Have you auditioned for YES Company before & not been cast? No Yes, # of times _____
Have you participated in YES Company before? No Yes, # of times _____
Have you participated in YES KIDS before? No Yes, # of times _____
Have you participated in YES KIDETTES before? No Yes, # of times _____

Experience: please list any drama, speech, dance or music classes, &/or any choral, musical, theatrical or church productions

Musical instrument: Yes, # of years _____ What instrument(s)? _____

Voice Training: Yes, # of years _____ School Choir Church choir Can read music
 Can read music Private lessons with _____

Dance Training: Yes, # of years _____ Studio(s) _____
 School Cheer Color guard Cultural _____

Movement Training: Classical: Ballet Point Ballroom # of years _____
Modern: Jazz Tap Modern Hip Hop # of years _____
Athletic: Gymnastics Aerials Flips Splits # of years _____

Hobbies &/or Interests: _____

Transportation to/from YES Co: I will... get a ride drive myself use public transit
 ride a bike walk need to carpool

Conflicts:
Are you enrolling in summer school? Yes No Is attendance mandatory? Yes No
List any possible schedule conflicts with dates (examples: *vacation, camp, other shows, etc.*)

Conflict _____ Date(s) _____

Conflict _____ Date(s) _____

If not cast, I would like to participate as:
 Stage Crew (set/prop construction, backstage help) Costume Crew

Rehearsals & Performance Commitment:
Varies by production

I am willing to accept any role I am offered. I understand the time commitment of YES COMPANY. I know that I may not be cast based on schedule conflicts or concurrent performing arts productions. I will be available to rehearse & perform during the dates and times as described above. Upon casting, I understand that I and a parent/guardian will be required to sign a Contract of Commitment.

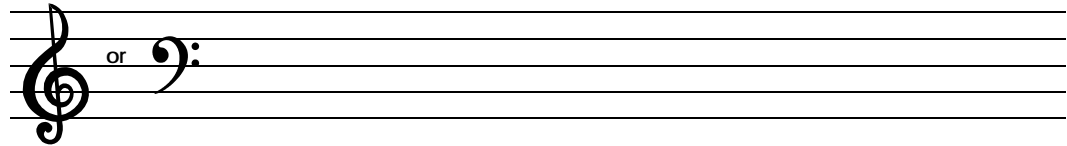


Please
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name
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Attach
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Signature _____ Date _____

Vocal Range:



- Voice Type: Soprano Alto Tenor High Baritone Low Baritone Bass
 Falsetto Belter Unchanged Changing

- Ability to Match Pitch: ① ② ③ ④ _____
 Quality: ① ② ③ ④ _____
 Projection: ① ② ③ ④ _____

Movement

- Dance ① ② ③ ④ _____

- | | | | |
|-------------------------------------|--------------------------------------|------------------------------------|---|
| <input type="checkbox"/> Non-Dancer | <input type="checkbox"/> Mover | <input type="checkbox"/> Dancer | <input type="checkbox"/> Feature Dancer |
| <input type="checkbox"/> Odd mover | <input type="checkbox"/> Went for it | <input type="checkbox"/> Knew it | <input type="checkbox"/> Skilled |
| <input type="checkbox"/> Awkward | <input type="checkbox"/> Has style | <input type="checkbox"/> Own style | <input type="checkbox"/> Presence |
| <input type="checkbox"/> Weak | <input type="checkbox"/> Potential | <input type="checkbox"/> Technique | |
| <input type="checkbox"/> Gave up | <input type="checkbox"/> Held back | <input type="checkbox"/> Strong | |

Communication:

- | | | |
|---------------------------------------|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> Quiet | <input type="checkbox"/> Confident | <input type="checkbox"/> Outgoing |
| <input type="checkbox"/> Held back | <input type="checkbox"/> Comfortable | <input type="checkbox"/> Speaks out |
| <input type="checkbox"/> Shy | <input type="checkbox"/> Eye contact | <input type="checkbox"/> Own style |
| <input type="checkbox"/> Nervous | <input type="checkbox"/> High Voice | <input type="checkbox"/> Natural |
| <input type="checkbox"/> Stand-offish | <input type="checkbox"/> Low voice | <input type="checkbox"/> Strong |

Overall:

- | | | |
|--------------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> Tiny | <input type="checkbox"/> Adorable | <input type="checkbox"/> Funny |
| <input type="checkbox"/> Tall | <input type="checkbox"/> Cute | <input type="checkbox"/> Has it |
| <input type="checkbox"/> Young look | <input type="checkbox"/> Beautiful | <input type="checkbox"/> Love 'em |
| <input type="checkbox"/> Mature look | <input type="checkbox"/> Nice | <input type="checkbox"/> Needs this |
| <input type="checkbox"/> Strong | <input type="checkbox"/> Active | <input type="checkbox"/> Not ready |

Auditions		Callbacks	Casting
Open	Site	<input type="checkbox"/> <i>Principal</i>	<input type="checkbox"/> Yes, as _____
<input type="checkbox"/> TDHS 3/1	<input type="checkbox"/> MTJH 2/27	<input type="checkbox"/> <i>Ensemble</i>	<input type="checkbox"/> No
<input type="checkbox"/> OHS 3/5	<input type="checkbox"/> GMS 2/28	<input type="checkbox"/> <i>Dancer</i>	<input type="checkbox"/> Alternate
<input type="checkbox"/> RJH 3/8	<input type="checkbox"/> TMD 3/6	<input type="checkbox"/> Late	<input type="checkbox"/> Crew
<input type="checkbox"/> JHS 3/11	<input type="checkbox"/> BHS 3/12	<input type="checkbox"/> Conflict	<input type="checkbox"/> Try KIDS
<input type="checkbox"/> CSUS 3/15		<input type="checkbox"/> No Show	
		Message with:	Message with:
		<input type="checkbox"/> Student	<input type="checkbox"/> Student
		<input type="checkbox"/> Parent	<input type="checkbox"/> Parent
		<input type="checkbox"/> Machine	<input type="checkbox"/> Letter
		<input type="checkbox"/> ?	<input type="checkbox"/> Machine
			<input type="checkbox"/> ?