

SHOW: _____



Minor (Under 18) Actor Audition Form

Personal Information:

First Name _____ Last Name _____ Age _____

Your Address _____ City _____ Zip _____ Height _____

E-mail _____ Phone _____

Pronouns: She / Her He / Him They / Them Other: _____

Parents Name: _____ Parents Cell: _____

Parents E-mail _____

Conflicts / Availability— please list all conflicts that might keep you from attending any rehearsal from the audition dates until the final performance. Please be completely honest. Conflicts won't necessarily preclude you from being cast in this show. If you are a **K-12 student**, state which school and when does school end for the day. If you work, please list your typical hours. Please list any extracurriculars that may pose a conflict.

Previous Experience: Is this your APA stage debut? YES NO

Please list up to five (5) examples of previous production experience.

Musicals Only:

Voice: *Soprano* *Alto* *Tenor* *Bass* Scales _____ to _____

Are you comfortable singing: Solo? **YES** **NO** Harmony? **YES** **NO** in a chorus? **YES** **NO**

Do you have any Dance experience: YES NO - If yes, explain: _____

Tell us if you have any special talents that may be used in this production. _____

(Continue to the back)

Desired Role(s) you are interested in :

___ I will ONLY accept the role(s) I have marked below:

1: _____ 2: _____
3. _____ 4. _____

___ I am interested in the parts listed, but will accept ANY part including ensemble.

___ I am ONLY interested in an ensemble part.

Gender Preference

___ I prefer male-presenting roles

___ I prefer female-presenting roles

___ I would play either male or female presenting roles

I, _____ hereby authorize and give my permission
(Print Your Name Here)
to the ACADEMY OF PERFORMING ARTS, to use (in any format) the likeness, name, voice
and words of _____, myself or (my child), without compensation to my
(Print Your Name Here)
child or me, for the purpose of communicating, promoting, or advertising the events of the
ACADEMY OF PERFORMING ARTS.

Actor's Signature: _____ Date: _____

Under 18 Parent/
Guardian Signature: _____ Date: _____

Director's Notes: