

THE ADDAMS FAMILY AUDITION FORM

Name (Please Print Neatly): _____

Home Phone: _____ Cell Phone: _____

Street Address: _____ City: _____ Zip: _____

E-Mail: (Please Print Neatly) _____

Age: _____ Height: _____ Hair Color: _____

If under the age of 18, please complete the following:

Parents Names: _____ Parent Cell Phone: _____

Parent E-mail: _____

PLEASE CHECK THE FOLLOWING:

Vocal Training:

What vocal part do you sing (Circle One:) Soprano: 1 or 2 Alto: 1 or 2 Tenor: 1 or 2 Bass: 1 or 2

Vocal Training: Yes No Number of years: _____

On a scale of 1-10, rate your sight-reading skills: _____

Dance experience? YES NO MOVER

If YES, please list style & ability level/years of training: _____

SIZING (SPECIFY KIDS/YOUTH, JR, ADULT, OR WOMEN'S/MEN'S):

T-shirt size: _____ Shoe size: _____

Pant size: _____

Dress size: _____

Conflicts: Please list on the back of this page & discuss conflicts with the director. Any conflicts given after casting will not be accepted unless given direct permission by the director. Because of the condensed nature of this show, it is imperative you attend every rehearsal, so number of conflicts may affect your casting.

Previous Experience: If you have a resume, please attach. If not, please list your relevant experience on the back of this form.