MOORESTOWN THEATER COMPANY, INC.

Alternative Stage AUDITION FORM (Please print all information neatly.)

Name:							(This improves your chances of getting a part, as it is easier to	
Address: City, State, Zip:						_	cast you if we can see who you are!) Thank You!	
						_		
E-Mail:	:					L		
School (2018-19):Opening Night Grade (2018-19):							Height:	
Your H	lome #:	1	Birt	Birth Date: / / Opening Night Age:				
Your C	ell #:	I	You	Your Work #:/				
Emerg	ency Contact	Name:		Emergency Contact #: _			1	
Please	list any conf	licts (i.e. vacations,	etc):				_	
Prefere	-	ne in each Area):	Drama	Compadi	A			
	Type: Number:	Musical One Scene	Multiple Scenes	Comedy	Any Any			
** Profe		Lead onsidered but not guara	Ensemble		Any			
		_						
Rank yo	our Past Exper Dancing:	ience (Circle one in ea Experienced	ach category): Intermediate	Regin	nor			
	Singing:	Experienced	Intermediate	Beginner Beginner Beginner				
	Acting:	Experienced	Intermediate					
		Past musical the	eater experience (write n	nore on back o	or attach r	esume):		
Date	Name Of Show		Role			Theater Group		
	_							
		Past acting, voice	or dance lessons (write	more on back	or attach	n resume)	<u>ı:</u>	
					<u> </u>	-		
					_			
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A non-returnable

photo MUST be attached here.