

Name _____ age _____

Height _____ hair color _____

Student cell# _____ e-mail _____

Parent name & cell _____

Please list your past musical theater experience (shows & parts):

Please list any past dance, singing, acting experience (not in a musical, and the age you were when you had the classes):

Please list the part(s) you are most interested in auditioning for in the order of preference:

Please choose one:

_____ I understand that Aladdin and Jasmine are kissing roles. I AM okay auditioning for these roles.

_____ I understand that Aladdin and Jasmine are kissing roles I am NOT okay auditioning for these roles.

******Important****** If you are not cast as a lead, do you still want to be in the cast? Please answer honestly. We are keeping the cast to a minimum, and if you truly only want to be a lead and would quit otherwise, let us know now. Check one:

Yes (I would still want to be in the cast) _____

No (I will do something else with my time) _____

Please list ALL dates that you have a conflict with rehearsal. Students are expected to be at ALL rehearsals. If you will miss one or two - list them now - you will be expected to be at all rehearsals you have not listed on this form. If you plan on missing a dress rehearsal or performance, DO NOT AUDITION. List all dates here:

Do not write below this line

Singing:

Acting:

Dancing:

Callback: