

BTAA Audition Form

Show: _____
 Name: _____ Desired Role: _____
 Age: _____ Height: _____ Phone: _____

Please Attach Photo to this sheet

Please list previous training and / or experience:

Voice: _____ Teacher: _____ How long?: _____
 Dance: _____ Teacher: _____ How long?: _____
 Acting: _____ Teacher: _____ How long?: _____

Please list previous performance experience (or attach a resume):

SHOW	ROLE	COMPANY	DATE

Attention: Parents and Performers!

The rehearsal schedule is structured around your attendance. Please list the dates you will be **ABLE** attend rehearsals. The general rehearsal days will be provided at auditions. Individual rehearsal schedules will depend on the characters and scenes being rehearsed (all performers will not at all rehearsals).

_____ **I can attend all rehearsals.**
OR
 _____ **I can only attend on the following Times:**
 List: _____

Please list all conflicts or vacations times:

Conflicts are used by the artistic team for casting and planning the rehearsal schedule for specific roles/scenes. Please be sure to list all conflicts. In order to ensure the quality of rehearsals and the production, any performer that has two or more absences that are not listed as conflicts may be recast or dismissed from the show.

Performer's Signature X _____
 Parent's Signature X _____