**Theater Department Audition Form: *The Legend of Sleepy Hollow***

Name Class of \_\_\_\_\_\_\_\_\_\_

Campus Address Box # Phone \_\_\_\_\_\_\_\_\_\_

E-mail address (print clearly) \_\_\_\_ Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ht Wt Hair Color Eye Color Age \_\_\_\_\_

**\*\* Please list any accents you can do effectively:**

**\*\* Please list any musical instruments you play and at what level:**

**Please list, *beginning with the most recent*, roles you have played or technical/production positions held. (Or, attach a resume.)**

|  |  |  |  |
| --- | --- | --- | --- |
| Role/Position | Production | Place of Production | Date |
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**Please check *one*:**

 \_\_\_\_ I will accept any role.

 \_\_\_\_ I prefer the role of but I will accept any role.

 \_\_\_\_ I will accept only the role of .

**SEE OTHER SIDE**

**Please block out times when you are busy with classes and extracurricular activities (meetings, rehearsals, practices) *including* weekends and evenings, from October 4 to October 31.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| 9:00 a.m. |  |  |  |  |  |  |  |
| 10:00 a.m. |  |  |  |  |  |  |  |
| 11:00 a.m. |  |  |  |  |  |  |  |
| 12:00 noon |  |  |  |  |  |  |  |
| 1:00 p.m. |  |  |  |  |  |  |  |
| 2:00 p.m. |  |  |  |  |  |  |  |
| 3:00 p.m. |  |  |  |  |  |  |  |
| 4:00 p.m. |  |  |  |  |  |  |  |
| 5:00 p.m. |  |  |  |  |  |  |  |
| 6:00 p.m. |  |  |  |  |  |  |  |
| 7:00 p.m. |  |  |  |  |  |  |  |
| 8:00 p.m. |  |  |  |  |  |  |  |
| 9:00 p.m. |  |  |  |  |  |  |  |
| 10:00 p.m. |  |  |  |  |  |  |  |
| 11:00 p.m. |  |  |  |  |  |  |  |

**Please list any non-recurrent commitments from October 4 to October 31.**

|  |  |
| --- | --- |
| Event | Date(s) and Time(s) |
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*Thank you very much! If there is anything else you think is important for us to know about you, please write it on a separate sheet of paper with your name at the top.*