


AUDITION FORM

(please print legibly and fill out entire form)

Name _____ T-Shirt Size: _____

Home Phone _____ Student Phone _____

Student E-mail _____

School _____ Grade _____ Age _____ Height _____

Parent/Guardian's Name _____

Phone _____ E-mail _____

Song you are singing today _____

What role are you auditioning for? _____

Will you accept any part? If no, please specify _____

List any vocal and/or choral training and experience _____

List theatrical experience (you may also attach a resume) _____

**IMPORTANT! PLEASE GO OVER THE REHEARSAL/PERFORMANCE SCHEDULE AND LIST ALL CONFLICTS BELOW.
(conflicts will not be accepted after casting)**

BY SIGNING BELOW, I AGREE THAT I WILL ABIDE BY ALL OF THE PALOS VERDES PERFORMING ARTS CONSERVATORY POLICIES REGARDING REHEARSALS AND PERFORMANCES, AND THAT I WILL EITHER PAY THE ENTIRE TUITION UPON CASTING, OR WILL HAVE COMPLETED AND SUBMITTED THE FINANCIAL AID APPLICATION BY THE AUDITION DATE. (Submitting an application is not a guarantee of financial aid. Please call the Conservatory office for more details.)

Auditioner's Signature _____

Parent/Guardian Signature (if under 18) _____

**For more information, please contact Joel Sluyter at (310) 544-0403 x303
JoelS@PVPerformingArts.com**