

Photo Included: Y/N

Audition #:_____

AUDITION FORM: Wizard of Oz- March 27-29, 2026

NAME:_____

PHONE #:_____ EMAIL:_____

ROLE(S) AUDITIONING FOR:_____

WOULD YOU ACCEPT ANY ROLE (please circle): YES or NO

Previous theatre production experience, roles, and year:

Show Title	Role	Year

Any previous training theatre, dance, or music experience (Please list):

Training	Years Practiced	Teacher or School Name

Other Talents: (gymnastics, tap, musical instruments etc.)

CONFLICTS

Please list any conflicts during the rehearsal periods of January 5th- March 29th, 2026

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

List three fun facts about yourself:

T-shirt Size _____

Height: _____

Chest: _____

Waist: _____

Hips: _____

Inseam: _____

Pants: _____

Jacket: _____

Dress Shirt: _____

#:-----

FOR THE DIRECTOR'S USE ONLY:

Singing:	Acting:
Dancing:	Stage Presence:

CALL BACK: Y N

Role assigned:_____