



# House Little Theatre

## Audition Information



Name: \_\_\_\_\_

Age: \_\_\_\_\_

Are you willing to change your appearance?  
(i.e.: dye/cut hair, shave/grow beard/mustache, etc)

Yes

No

Phone #: \_\_\_\_\_

Email address: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Add photo, one will be taken at auditions if needed.

The part I would prefer:

\_\_\_\_\_

Will you accept a part other than your preference?

Yes

No

Would you be interested in working on any of the following aspects of the production?

Makeup

Props

Publicity

Set Construction

Costumes

Lights

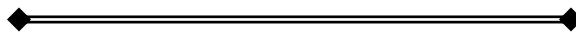
Sound

Painting

Other: \_\_\_\_\_

**Previous Acting Experience:** (most recent/favorites)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**Conflicts:** (from audition to week of show open—no conflicts the week that the show opens)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_