



JCC Performing Arts

Audition Form

Name: _____ Age: _____ Gender: _____

Adult/Guardian Email: _____ Adult/Guardian Phone Number: _____

Please list the following:

Height: _____ Shirt Size: _____ Pant Size: _____ Dress Size: _____ Shoe Size: _____

Please list all of your conflicts from February 2nd through May 31st (Sunday Afternoon's 3-5pm)
*(*Please note that Rehearsal time changes to 3-6pm starting on March 29th through May 31st)*

Please note Tech Rehearsal is on Tuesday, June 2nd and Dress Rehearsal is on Wednesday, June 3rd
Performances are Thursday, June 4th and Sunday, June 7th.

Please List any prior experience you may have performing
(Please list, play, role, where and when it was performed)

Can you read music? Yes No
Singing Experience: None Beginning Trained (____ years)

Dance Experience:
None Musical Theater Show Choir Ballet Tap Jazz Other _____

Is there any role that you are most interested in? If so what role?