



WELCOME TO THE BELFRY THEATRE AUDITION/CONTACT FORM



Please fill out as much of the requested information
as possible, or circle the appropriate choice where applicable.
PLEASE PRINT CLEARLY

Full Name: _____
Home City: _____
Phone: _____
Email: _____

Are you on Social Media? Facebook: Y / N Instagram: Y / N

Stage Age Range: _____

Height: _____ Dress Size: _____ Shirt Size: _____ Pants Size: _____ Shoe Size: _____

Theatre Experience: (continue on back, or attach resume)

Show	Role	Theater	Year

Preferred role(s): _____

If not cast, would you consider another role: Y / N

How comfortable are you with physical comedy? _____

Please review the rehearsal and production schedule. List any known conflicts below.

Can you play an instrument? _____

Favorite 1960's song: _____

Additional information you would like to share: _____
