

PLAYWORKS AUDITIONS APPLICATION

TYPE OR PRINT LEGIBLY IN BLACK INK
ONE FORM PER DELEGATE- YOU MUST BE A THESPIAN TO AUDITION
BRING TO FESTIVAL- DO NOT MAIL WITH REGISTRATION

ATTACH A SMALL PHOTO IN THE RIGHT HAND CORNER.

APPLICANT'S NAME _____ YEAR INITIATED AS A THESPIAN _____

GENDER: _____ MALE OR _____ FEMALE BIRTHDATE _____ GRADE _____

CELL PHONE _____ FESTIVAL HOTEL _____

HIGH SCHOOL _____ TROUPE # _____ CITY _____, CA

TROUPE DIRECTOR'S NAME _____ TROUPE DIRECTOR'S CELL # _____

Are you auditioning for the ALL STATE SHOW? _____ Yes _____ No _____ Act _____ Audition Time

Are you performing in IEs? _____ Yes _____ No _____ Category One _____ Audition Time

_____ Category Two _____ Audition Time

Are you in _____ PLAY MARATHON OR _____ SCENEFEST _____ NEITHER

PLAY MARATHON AUDITION TIME _____ SCENEFEST AUDITION TIME _____

If cast in Playworks, do you understand that you are required to attend all rehearsals? _____ initial here for yes

Theatrical Experience

Please list your most recent theatrical experience first.

ROLE	PLAY	THEATRE GROUP	DIRECTOR
1.			
2.			
3.			
4.			
5.			

I wish to audition for _____ all plays or only _____

Do not write below this line.

Bring 3 copies of the Playworks Application with a small photo attached to each of the three forms to the Playworks Auditions on the Friday of Conference.

(Only Thespians intending to audition for Playworks need to bring this form.)