MATILDA AUDITION FORM

Name:			Birthdate:		
Height: Weight:		,	Age:	_ Stage Age:	
Phone:		_ Email:			
Facebook:		_			
Role of Choice: 2 nd Choice			3 rd Choice		
Please CIRCLE all that apply:					
Would you consider other roles? Would you accept an ensemble role? Are you willing to play an understudy?	YES ng the Attach	Resume	Company/Year Company/Year Company/Year		
	MANE MARCI 11, 17 ORM ARSAI	DATOR H 26 @ , 18 @ ANCE L CONI	Hip Hop Balli RY REHEARSAI 7:30PM. PER 7:30pm, and DATE CONFL	room # Years: LS. TECH WEEK IS MARCH FORMANCE DATES for MARCH 29, APRIL 5,12, 19	
[Please list ALL times when you are NOT availabl Monday <u>Tuesday</u> <u>Wednesday</u>	le for e		s after 6pm and		