



## WELCOME TO THE BELFRY THEATRE AUDITION/CONTACT FORM

Please fill out as much of the requested  
information as possible or check the  
appropriate choice where applicable

PLEASE PRINT CLEARLY

Today's Date: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_ City & Zip: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Are you on Facebook:  Yes  No If Yes, under what name: \_\_\_\_\_

Stage Age: \_\_\_\_\_ Height: \_\_\_\_\_ ft. \_\_\_\_\_ in. Dress Size: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

Pants Size: \_\_\_\_\_ Shoe Size: \_\_\_\_\_

Preferred role(s) in this show: \_\_\_\_\_

I will accept (check one):  Any role  Only my preferred role(s)

I'm willing to style my hair to fit the role:  Yes  No

Please list previous theatrical experience (or submit resume): \_\_\_\_\_

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

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How did you hear about auditions? \_\_\_\_\_