

Sampson Community Theatre Audition Form



Name _____ Age _____

Grade Level (if applicable) _____ Parents/Spouse _____

School Attending or Work Place _____

Phone number (____) _____ for text messages Alt Phone (____) _____

Email _____

May I share your contact information with the cast? Yes No

(I prefer) Part Desired if known _____ Will you accept another role? ____
a major acting role _____ a minor acting role _____ ensemble role _____
dancer _____ singer _____

If the director chooses to double cast do you still want to be considered for a part in
the production Yes No

Previous theatrical experience for playbill _____

Scheduled conflicts (VERY IMPORTANT) between now and the scheduled showdates

Monday	6pm-8pm	yes	no	Friday	6pm-8pm	yes	no
Tuesday	6pm-8pm	yes	no	Saturday	10am-3pm	yes	no
Wednesday	6pm-8pm	yes	no	Sunday	1pm-5pm	yes	no
Thursday	6pm-8pm	yes	no				

Shirt Size _____ Pants _____ Dress/Skirt _____ Shoes/Boots _____