



North Fulton Drama Club

Audition Form - Please Print

Production: **Twelfth Night**

Date:

Name	Home phone	Work phone
Address	Sex	Ages you can play
City, state, ZIP	Hair	Vocal range
Email		
Check here if you will accept any part <input type="checkbox"/>	Even if you checked the box, say here which parts especially interest you	If you did not check the box, say here which parts you would not accept
List here the dates between now and the closing night of the production when you will not be available for rehearsals, performances and other calls (note if you are using the back of this sheet)		What special skills do you have? Examples: musical instruments, dancing, other performance skills, technical theater skills
Briefly describe your theater experience		How did you learn about these auditions? <input type="radio"/> Atlanta Performs <input type="radio"/> NFDC web site <input type="radio"/> friend <input type="radio"/> poster or flyer <input type="radio"/> other:

► Please turn the page over and print at the top your name and the parts you especially want to read for.

<i>This space for director's use</i>	Are you willing to alter your appearance for this production?
	Please indicate in the space below anything such as set building or tech that you would be interested in: <input type="radio"/> set building and/or <input type="radio"/> set design <input type="radio"/> sound/lighting design and crew <input type="radio"/> costume building and/or <input type="radio"/> costume design <input type="radio"/> makeup and hair styling <input type="radio"/> backstage crew <input type="radio"/> props <input type="radio"/> publicity <input type="radio"/> seating/crowd management <input type="radio"/> other: