

TODAY'S DATE: _____

IS THIS YOUR FIRST MAJESTIC AUDITION? _____

WELCOME! *Thanks for coming to audition today.*

PLEASE PRINT CLEARLY

Participant Name: _____ Phone: _____

Participant Email: (if applicable) _____

Participant Date of Birth: ____/____/____ Sex: ____ Height/Weight: _____ Hair/Eye Color: _____

Parent/Guardian Name: _____ Phone: _____

Parent/Guardian Email: _____

Mailing Address: _____

Zip Code: _____

Are you vaccinated against COVID-19? _____ If no, do you plan on getting vaccinated? _____

1. Please list the show(s) you are auditioning for: _____

2. Are you auditioning for a specific role? if yes, please specify: _____

3. Will you accept ANY ROLE offered to you? _____ (please be honest - we won't hold this against you!)

4. Please list all conflicts (*excessive conflicts may result in you not being cast*):

5. Please list all prior stage/dance experience (use back or attach resume as needed):

7. How did you hear about today's audition?

7. Title/show name of the song you are singing today, or monologue title (if applicable):

8. If you would like to be added to our email lists please specify here:

_____ AUDITIONS

_____ SHOWS

_____ VOLUNTEERING



The Majestic Theatre and its divisions are equal opportunity member organizations. All actors are expected to pay a production fee (due at the first rehearsal) to help cover insurance costs.

Amount of production fee is specified on the FACT SHEET.