Audition Form: PICNIC

Name: _____ #_____

Role(s) auditioning for: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: ( ) _____ - _____ Ages you can portray: _____

E-mail: _____ Height: _____ Shoe: _____

Will you accept a role other than one listed above (please be honest)? Yes _____ No _____

Have you performed in this show before? Yes, role_____ No _____

Are you interested in working on this show if not cast? Yes___ No____ How_____

Are your currently a Hawthorne member? Yes _____ No _____

On-Stage Experience: please list or attach a summary. Please provide a recent headshot or school picture.

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