



Panhandle Community Theatre

Audition Form

Name _____ Sex: M F Age _____

Email _____ Phone () _____

Address _____ City _____ Zip _____

Theatre Experience *(use page back if necessary)*

Role	Production	Year

Preferred role(s) : _____

Would you take any part? Y N If not cast, would you work in another capacity? Y N

Specify any special talents: _____

Describe yourself (use your creativity): _____

List any known conflict dates: _____

Director's notes: