## The Greenbelt Arts Center Audition Form PLEASE PRINT

Production:						
Name:						
Address:						
City, State, Zip:						
Email:						
Phone:						
Preferred contact method	: Email Pho	one call	Text Message	Other:		
Gender:			Pronouns:			
Age Range:			Hair and eye colors:			
For Musicale Only:						
For Musicals Only:			Vess! Dense:			
Vocal Experience/Training:			Vocal Range:			
Dance Experience/Training	ng:		Dance Level:	Beginner	Intermediate	Advanced
Desired role(s):						
Any role(s) you will not accept:						
Please list all conflicts between now and the closing date of the show, here or on the back of this page. Indicate if they are a one-time conflict (specific date) or recurring.  PLEASE NOTE THAT NO CONFLICTS CAN BE ACCEPTED FOR TECH WEEK OR ANY PERFORMANCE DATES.						
Any special talents or abilities?						
Anything else you would like us to know about you?						
If we are unable to cast you in this production, would you be interested in helping in any of the following areas? (Check any that apply)						
Lights	Sound	Props	Pul	blicity	Box Office	
Costumes	Makeup and Hair	Set Construc	tion Set	t Painting	Backstage	Crew
Sign here to verify that you are vaccinated against COVID-19 and will provide proof of vaccination to the Greenbelt Arts Center no later than the first rehearsal if you are cast. GAC Policy requires that all cast and crew members be vaccinated.						

\_Date:\_\_\_\_

Signature: