## **THE SECRET GARDEN - MARY & COLIN AUDITIONS**

## Audition Form / Grandstreet Theatre

NAME:			
MAILING ADDRESS:			
CITY:	ZIP (	CODE:	
PHONE: CELL( )	HOME(	)	
E-MAIL:			
PRONOUNS:			
BIRTHDATE: Month Day	Year		
EMERGENCY CONTACT:		_PHONE:	
HEIGHT:			
Are you available for a potential callba	ck on:		
Sunday, November 9th (between 2:00pm and 5:00	)m)	YES	NO

## Please list up to 4 of your most recent roles (or attach resumé):

SHOW TITLE	ROLE					
In the space below, please list and briefly describe any major scheduling conflicts between February 23rd and May 3rd.						
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CONFLICT DATES:						
CONFLICT DATES:	<b>-</b>					
CONFLICT DATES:	<b>-</b>					
CONFLICT DATES:	-					

In the space below, please list and briefly describe any recurring weekly obligations when you would be UNAVAILABLE to rehearse in the evenings. For example: "work until 6:30, arrive by 7:00" or "dance class every Tuesday night at 8:00"

SAT	SUN	MON	TUE	WED	THU	FRI