

# Helen Hayes Youth Theatre Audition Form

Name \_\_\_\_\_

Email Address: \_\_\_\_\_

Age \_\_\_\_\_ Current Grade in School \_\_\_\_\_

Please list theatrical performance experience (include name of show, name of theater company, part you played):

Please list all performing arts classes/lessons (acting class, dance class, voice lessons, chorus, etc.) that you have participated in:

Please list special talents you might have such as speaking a foreign language, *playing a musical instrument*, gymnastics, soccer playing, juggling, tightrope walking, cheerleading, etc.:

What would be your dream part in this show? \_\_\_\_\_

Please complete and email form to : [helenhayesyt@gmail.com](mailto:helenhayesyt@gmail.com)

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For Director's/Choreographers Use

Vocal:

Dance:

Reading: