



Caledonia Middle School  
Players  
2024 Audition Form  
7<sup>th</sup> 8<sup>th</sup>

Name \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

Parent Name(s) \_\_\_\_\_

Parent Phone \_\_\_\_\_ Parent Email \_\_\_\_\_

Please completely list all conflicts you have with the rehearsal schedule. If you have no conflicts, please note that as well. **It's the expectation that each student who receives a lead role makes a commitment to maintain 100% attendance at ALL rehearsals to ensure the success of the production. Emergencies are the ONLY exception. Please consider this thoroughly.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Roles I am interested in:  
\_\_\_\_\_  
\_\_\_\_\_

I give permission for my child, \_\_\_\_\_,  
to audition for the CMSP production of Seussical, Jr. I have looked over the rehearsal and performance schedule and have noted all conflicts.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_