

# *U.G.L.Y. Girl Productions*

Unique Gifted Loved Yielded

## AUDITION FORM

Name

Address

City

State

Zip

Email Address

Parent/Guardian Name (if under 18)

Cell Phone ( )

Call or Text (circle one)

Best time to call

Roles you are interested in:

Title of Production of Interest

Any Production

Are you willing to accept any role offered to you?

Do you have regular access to the internet?

Are you willing to travel Yes  No  If so, how far are you willing to travel to rehearsals and sets for filming: Miles: \_\_\_\_\_ (no reimbursements for gas or for any travel including airfare or lodging each cast member is responsible for their own travel and accommodations)

CONFLICTS (specific dates and times, please)

Mondays  Tuesdays  Wednesdays  Thursdays  Fridays  Saturdays  Sundays

Dates:

Times:

Days:

Evenings:

## PERSONAL INFORMATION

(Personal information is for casting purposes only it does not weigh in anyway on your involvement in our company and will not be shared with any outside entities)

Age:                      Sex: Female  Male                       Height:                      Race:

## SKILLS

Vocal \_\_\_\_\_ (i.e. soprano, alto, tenor, bass) Acting Skills: Yes  NO  (if so how long: \_\_\_\_\_)

Are you interested in working on special projects related to the show:

Stage  Crew  Props  Costumes  All of the above

Where did you hear about us?

PLEASE LIST PRIOR EXPERIENCE IN SPACE BELOW (please send resumes to [shondajstephens@gmail.com](mailto:shondajstephens@gmail.com). Include voice, dance, acting training and theatrical experience.

**PLEASE PRINT THIS FORM, COMPLETE IT, AND BRING IT WITH YOU TO AUDITIONS.**