



Audition Form



www.KidsMusicalTheater.com

\$25.00 Audition Fee payable to St. John's (note KMT in the memo).

Name of actor: _____ Age: _____ Grade: _____

1st Choice: _____ 2nd Choice: _____

Will you accept another part if offered? _____ Comments? _____

List theater experience: _____

List commitments that may interfere with rehearsals or performances (i.e. school, sports, other theater commitments, vacations, etc.): _____

Number to call if invited to Callbacks: _____

Place Audition
Photo Here

No larger than 4 x 6

You may use a **candid photo that clearly shows the actor's face** –
A professional headshot is not necessary

For Committee only:

Audition Fee: Cash or Check # _____