Tecumseh Youth Theatre Audition Form



PO Box 2 Tecumseh, MI 49286 www.tecumsehyouththeatre.com

Audition#						
Please Circle One: Elem. Musical	MS Musical		HS Straight Play	HS Musical		
What part are you auditioning for?						
Student Name:						
Parent Name:						
Grade:	Attend	ling School	:			
TShirt Size: Child Small	Medium	Large	XLarge			
Adult Small	Medium	Large	XLarge	XXLarge		
Primary Contact Email address (ple	ease print clearly	·):				
Secondary Contact Email Address:						
Primary Phone:	imary Phone:			Secondary Phone:		
nities you have participated in (i.e include show/role for any musical	. Fine Arts Day, theater or straightents that may co	TYT shows t plays.	s, dance recitals, Croswel	Please include all performing opportu- ll Shows, Choir Concerts etc). Please y date that you may have a major con- etc.)		
Sunday						
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						

Additional Conflicts:

Saturday