

Seungalaxy music world wide Audition Form

Name: _____

Age: _____ Height: _____ Weight: _____

Phone: _____ Email: _____

Address: _____

Parent/Guardian Name(s): _____

How did you learn of this audition: (newspaper/radio/website/flyer/friend, etc.): _____

Special skills or Talents (dancing, singing, musical instrument, etc.): _____

Do you have any scheduling conflicts (including weekends) between now and opening night performance?

Anything else the Director should know about? _____

What type of song do you sing?

Your sponsor signature

Your own signature

..... Management.....

Signature

Date
