



El Campanil
Children's Theatre

~ Please Print Clearly ~

Name _____ Play: _____

Age: _____ Height _____ Hair Color _____

Address: _____

City _____ Zip _____

Email _____ Home Phone _____ Cell _____

Parent Cell _____ Parent Email: _____

School: _____ Grade: _____

Skills: (Circle) Sing Dance Musical Instrument Gymnastics Sports Dialect

Role Desired _____ Will you accept any role? _____

Conflicts: (You must be available for all rehearsals & performances) _____

Experience: _____

Director's Notes: _____

Vocal: 1 2 3 4 Expression: 1 2 3 4