

Tecumseh Youth Theatre Audition Form



PO Box 2 Te	ecumseh, MI 49286	www.tecumsehyor	uththeatre.com		
Audition	Date:	Audition #			
Circle One:	Elem. Musical	MS Musical	HS Straight Play	HS Musical	
Student Name	e:		Grade:		
Parent Name:	:				
Primary Conta	tact Email address (pleas	se print clearly):			
Secondary Co	ontact Email Address:				
,					
Primary Phon	ie:	Secondary Phone:			
What part are	e you auditioning for:				
Are you curre	ently taking classes in th	ne fine arts? (choir, ba	and, orchestra, dance, gyr	mnastics): Y / N	
-	many years and where?		•		
	illuing yours				
Sunday					
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Production Team Use Only					

Bust	Pant Size
Waist	Shirt Size
Hips	Dress Size
Girth	Inseam