

## YOUNG ARTIST PROGRAM AUDITION FORM

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NAME:					
EMAIL ADDRESS: *Student & Parent's Email address					
PARENT'S CELL PHONE:					
CURREN	Γ GRADE:				
HEIGHT		HAIR COLOR			
VOCAL T	YPE:				
ALTO	SOPRANO	BARITONE	TENOR	DON'T KNOW	
ROLE IN	ΓERESTED IN:				
THEATER EXPERIENCE:					
CONFLIC	ETS				