Chapin Theatre Company
Audition Form

CHICAGO: March 6 - 16, 2025
Auditions: October 6, 7 & 8, 2024 6:30pm

Please PRINT CLEARLY

Name: _____

Address: _____

Phone: _____ Mobile: YES / NO

E-mail: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Previous Roles/Theatrical Experience: *Include name of Theatre and Director* (You may attach a resume or list more on back, if necessary.)

_____ _____

_____ _____

_____ _____

_____ _____

Which role[s] you are auditioning for: _____

Will you accept any role? **YES / NO** _____

If not cast, are you interested in a production job? **YES / NO**

*Please list all conflicts from January 5, 2025 through the show.
*Attendance is mandatory from February 16 until the end of the show on March 16, 2025.

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