

Laguna Hills High School Theatre Department
CAST Application

PRINT CLEARLY, PLEASE!

Name: _____ Grade: _____

Email: _____ Cell Phone #: _____

Vocal Range: Soprano/Tenor (high) Alto/Bass (low) Not Sure

Dance Level: Beginner Intermediate Experienced

Acting experience, if any (list most recent first):

Title of Play	Location/Year	Character Played
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Special Skills (tumbling, musical instrument, dialects...) _____

Please list any conflicts you may have with afternoon and Saturday rehearsals and show dates (including days and time of conflicts): _____

PREFERRED ROLES: List your top choices for roles in the show, or write "No Preference".

- | | |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

If you do not receive your preferred role, would you consider another part? YES NO

If you don't get an onstage role, would you like to join the production crew? YES NO