



LAST NAME: _____

PERFORMANCE EXPERIENCE SUMMARY FORM

2010 WI THEATRE AUDITIONS & TECH INTERVIEWS

This form must arrive in Madison no later than February 5, 2010.

Use this form only. Other forms/resumes will not be accepted.
Please type or print with black ink. **This form will be photocopied for producers.**

Name _____

Print all information clearly!

Address _____

Permanent Address _____

Phone _____ Cell _____ Email _____

Height: _____ Weight: _____ Age: _____ Gender: _____

Actor Singer Dancer Vocal Range: _____

Musical Instruments played and/or special talents: _____

If student, circle: High School College AND what year next fall? Fr Soph Jr Sr Grad

Are you a member of a professional theatre union? _____ If yes, which one? _____

Circle primary theatre experience: Educational Community Semi- Professional Professional

Check areas of interest: Professional Intern Apprentice Youth Touring Outdoor Theatre
Graduate Professional Training Musical Theatre Non-Musical Theatre

Check availability for employment: Next summer Next fall Now Full-time Job-ins

Earliest date available for employment: _____ until _____

Complete the **Experience Outline** below. Use **only this side** – do not write on reverse side of this form.

Be prepared to provide photos, complete resumes and name/contact information if requested at callbacks.

Year	Play Title	Role	Producing Organization	City/State

Please attach a recent black and white photograph in this space.

DO NOT STAPLE

Photo must fit within this outline.

Mail this Experience Summary Form with your registration and payment no later than Friday, February 5, 2010.

If you do not meet this deadline, **you MUST make 20 copies of your Experience Summary Form prior to Wisconsin Theatre Auditions and bring them for us to distribute on-site. Forms must be 3- hole punched.**