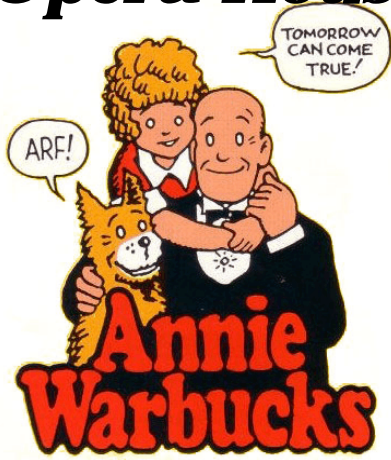


# Opera House Players Tryout Sheet



Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town: \_\_\_\_\_

Phone : \_\_\_\_\_

Email : \_\_\_\_\_

If under 18 - please fill in the next line

Age: \_\_\_\_\_ Grade Level (Next Fall) : \_\_\_\_\_ Parent/Guardian : \_\_\_\_\_

Character Preference (if any) \_\_\_\_\_ Is this the only part you will accept? \_\_\_\_\_  
Please list any known conflicts between now and October 7, 2006

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Would you or your parents be willing and/or able to help out with any of the following crews?

- |  |  |
|--|--|
| <input type="checkbox"/> Set Construction              | <input type="checkbox"/> Lights            |
| <input type="checkbox"/> Set Detailing (Painting)      | <input type="checkbox"/> House Preparation |
| <input type="checkbox"/> Show Promotion                | <input type="checkbox"/> Pit Orchestra     |
| <input type="checkbox"/> Costumes                      | <input type="checkbox"/> Make-up           |
| <input type="checkbox"/> Show Production               | <input type="checkbox"/> Advertising       |
| <input type="checkbox"/> Ushering                      | <input type="checkbox"/> Programs          |
| <input type="checkbox"/> Youth Supervision (Rehearsal) | <input type="checkbox"/> Props             |

----- Please do not write below this line: -----

Vocal Range: \_\_\_\_\_

Vocal Quality (Projection / Confidence) \_\_\_\_\_

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Stage Expression (Vocal / Facial / Body) \_\_\_\_\_

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Comments / Remarks \_\_\_\_\_

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