

Musical Audition Survey

Name: _____ Grade: _____

How big of a speaking part would you be comfortable with?

Big speaking part Medium speaking part Small speaking part No speaking part

Would you be comfortable singing a solo in the musical?

Yes No

How comfortable are you with dancing?

Very comfortable Kind of comfortable Not comfortable

.....
for director use only

Vocal Audition

5 4 3 2 1

Acting Audition

5 4 3 2 1

Dancing Audition

5 4 3 2 1

THE GRUNCH

Please complete both sides of this paper and return to Mrs. Donatelli by November 15th.

Student's Name: _____

Homeroom: _____

Parent / Guardian Name: _____

Primary Phone Number: _____

***** Upon casting this production, we will be utilizing the app 'Remind'. I acknowledge that, if my student is cast, I am able to receive text message updates via this number in regards to rehearsals.**

Student Allergies / Health concerns of which we should be aware:

Auditions for this production will be divided among three days, according to grade level.

My student is in (please check one)

_____ Third grade and will be attending auditions (and therefore not be riding the bus home) on Wed, Nov. 20th

_____ Fourth grade and will be attending auditions (and therefore not be riding the bus home) on Thurs, Nov. 21st

_____ Fifth Grade and will be attending auditions (and therefore not be riding the bus home) on Fri, Nov. 22nd

Parent / Guardian Signature

Date