Theatre Production Application

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| We are extremely excited that you have chosen to audition for the Westbury Magnet Theatre Production Department. Our Theatre Production classes have several opportunities to perform for both the public and neighboring schools. We use our audition process to determine your placement in our classes as an intermediate or advanced performer. We look forward to seeing you share your talents and become a part of our family. | | | | | | | |
|  | | | | | | | |
| Name: | | | | | | | |
| Address: | | | | | | | |
| City: | | State: | | | | | Zip Code: |
| Home High School: | | | | | | | |
| Guardian Name: | | | | | | Phone Number: | |
| Guardian Name: | | | | | | Phone Number: | |
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| **Theatre Experience** | | | | | | | |
| Crew  Actor | Name of Play Production | | | Part in the Play/  Crew position | | Director’s Name: | Director’s Contact phone numbers |
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| **Special Skills** | | | | | | | |
| Directions: Please list any special skills you may have and years of training. Ex: tumbling, singing, playing instruments. You must include Teacher/Coaches full name and valid contact information. | | | | | | | |
| Special Skill | | | Years of Training | | Teacher/Coach’s Name | | Teacher/Coach’s  Phone numbers |
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| By signing below, you acknowledge that all information on this form is true. Any misinformation could impede the student from being accepted into the Magnet Theatre Production Classes or possibly being removed. | | | | | | | |
| Print: Guardian Name | | | Signature | | | | Date |
|  | | |  | | | |  |
| Print: Guardian Name | | | Signature | | | | Date |
|  | | |  | | | |  |
| Print: Student Name | | | Signature | | | | Date |
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