



WEST SEATTLE HIGH SCHOOL
Drama Club



The Pajama Game

AUDITION FORM

All Auditioning Students:

Before you enter for your audition, please complete this form, the Conflicts Sheet on the back, and the attached Parent/Student letter.

Name: _____

Grade: _____

Age: _____

Phone #: _____

Email: _____

Performance Experience (past two years only, feel free to include music, dance, public speaking, etc.)

Is there any role you will not accept?

Would you be interested in taking on the responsibility of an understudy?

Class Schedule:

Anything else you want us to know:



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CONFLICT NOTICE

Please list in the space provided any conflicts (retreats, tests, college visits, tournaments, dentist appointments, etc.) you might have with the rehearsal or performance dates. *Only conflicts listed here will be honored.*

Name: _____

Date: _____

Day/Date	Nature of Conflict

If you have any questions please contact Mr. Finley at amfinley@seattleschools.org