

# **Student Information Sheet for 2019-2020 LMS Advanced Theatre Auditions**

**Please complete this form and return to Mrs. Kelley by 2/11/2019.**

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

**Gender (circle one):** M or F

**Parent Name:** \_\_\_\_\_

**Parent Phone Number:** \_\_\_\_\_

**Parent E-mail:** \_\_\_\_\_

**Your current grade level (circle one):**      5                  6                  7

**What school do you currently attend:** \_\_\_\_\_

**One interesting or surprising thing about you:**

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**Have you been involved in theater before? If so, please provide your prior**

**experiences below:**

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