

KCC OPERA WORKSHOP AUDITION FORM

Please note: If casted, you must register for MUSI297 or C297

PERSONAL INFORMATION:

Name _____

Address _____

Phone _____ Email _____

Vocal Category _____ (soprano, mezzo, tenor, baritone, bass)

If you are a student, please provide me with your K ID _____

EXPERIENCE: Vocal and Acting

Vocal Studies:

Number of years of professional study (with a voice teacher) _____

Number of years of singing (solo/ choir/small ensemble) _____

PREFERENCE: (X all which apply)

___ **Lead**

___ **Supporting**

___ **Ensemble**

Rehearsal Conflict Policy

- All rehearsals are mandatory
- **All rehearsal conflicts must be submitted two weeks in advance unless it is an emergency**
- **Emergency conflicts should be submitted via email to blanchardg@kellogg.edu**
- Emergency conflicts must be submitted prior to the start of rehearsal
- Too many conflicts will result in dismissal from the production

-All performances are mandatory

Name:

Day:

Date:

Purpose for release: