

AMTC Audition Application



Name _____ Age _____

Phone(s) _____

Address _____

City, State, Zip _____

Email Address _____

Name of person with you today _____

How did you hear about AMTC _____ Photo attached? Yes _____ No _____

School _____ Grades: Gifted _____ Superior _____ Good _____ Average _____

Sports enjoyed or athletic achievement(s) _____

For Adults: Your occupation _____

For Teens/ Children: Mother's occupation: _____

Dad's occupation: _____

Applicant's interest: Actor _____ Singer _____ Dancer _____ Model _____

Other Interest _____

How long have you wanted to be a model/ actor/ singer/ or dancer? _____

In terms of modeling or talent, what are your goals? _____

How would you rate your interest level in being a model/ actor/ singer or dancer?

(Please check one.) Extremely High _____ High _____ Somewhat interested _____

Wanted to see what would happen _____

For Models Only: Height _____ Weight _____ Dress size _____ Hips _____

Current Agency, previous competitions, searches or experience _____

For Actors & Talent Only: please list previous training or experience. (Attach resume or use the back of this form, if needed.) _____

Questions or Concerns: _____