



drama learning center

"Where everyone's STAR shines bright!"

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www.dramalearningcenter.com

TYA Audition Form

Name: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Parent Email: _____

Age: _____ Grade: _____ School: _____ Vocal Part: _____

* Please list past performance experience below or attach resume (preferred):

SHOW	ROLE	WHERE

* Please check below if you have received instruction in any of the below mediums, and write below the number of years taken:

Dance Private Voice Other Musical Instrument

* Please briefly answer the following questions on the back of the audition form or attach answers.

1. Why are you interested in being a TYA company member?
2. What are your aspirations in theatre?

*If not selected to be a TYA member, are you interested in other classes at DLC to better your performance/backstage skills? YES NO

* How did you hear about TYA? _____

BREAK A LEG!