

# APPLICATION FOR AUDITION

**1. Complete this form    2. Have your parent or guardian sign it    3. Mail it to the Governor's School**

Name \_\_\_\_\_

Date \_\_\_\_\_

Would you like to be added to our mailing list? Yes \_\_\_\_\_ No \_\_\_\_\_

Home phone \_\_\_\_\_

Address \_\_\_\_\_

Parent work phone \_\_\_\_\_

Street

City

Zip

Applicant's E-mail \_\_\_\_\_

Parent's E-mail \_\_\_\_\_

School Attending Now \_\_\_\_\_ Current grade \_\_\_\_\_

School/Next year \_\_\_\_\_

You may audition for more than one, but not more than three areas. Check areas in which you wish to audition.

VISUAL ARTS

THEATRE

MUSIC

DANCE

Acting

Instrumental/Classical

MUSICAL THEATRE

Design/Production

Instrumental/Jazz

VOCAL MUSIC

I give permission for my son/daughter to audition for The Governor's School for the Arts. If the audition is successful, I understand that additional student information and recommendations will be required for admission to the school..

Parent/guardian's name \_\_\_\_\_ Parent's/guardian's Signature \_\_\_\_\_

**Please mail to The Governor's School for the Arts C/O Old Dominion University, Norfolk, VA 23529-0556**