



and THE READING PUBLIC SCHOOL DEPARTMENT
announce auditions for

THE FIVE STAR THEATRE SUMMER PROGRAM 2024

Please complete this form and bring it with you to the auditions
on January 16th, along with a brief resume and current photo.

Enrollment Form

Name as it will appear in the show program: _____

Parents' names _____

Street Address _____

City/Town _____ Zip Code _____

Telephone (_____) _____ Cell Phone _____

E-mail address (please print) _____

Date of Birth _____ Current Age _____

Age (from July 1- 27) _____ Height _____ Current grade in school _____

Years of Five Star participation: _____

School you currently attend: _____

I have read and understand all requirements for auditioning:

[Parent/Guardian Signature]