



Audition for enrollment

Please fill out this form to setup an interview / auditions for enrollment.

Full Name	Age
Email	
Phone	
About you	
How did you find out about us?	
What is your acting experience, if any?	
How would you like to grow if you were accepted into The Meisner Technique?	
What is your dream?	
What is your availability?	

Please fill out and send form to:

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