



**Natalie Sexton Associates**  
**Audition Form 2020**

Please attach  
a recent head  
and shoulders  
photo here

Child's Name	
Age	
Date of Birth	
Current Height and Date Measured	
Current agent if applicable	
Parent/Guardian Name	
Parent/Guardian Contact Number	
Parent/Guardian Contact Email (checked regularly)	
Relevant performance experience	
Dance Experience (Please include styles, grades and any titles held)	
Additional Skills (Musical instruments, sports, languages etc – please detail level/grades/years training)	
Interested in: please tick all that apply	
<input type="checkbox"/> Film <input type="checkbox"/> TV <input type="checkbox"/> Theatre (West End) <input type="checkbox"/> Theatre (Regional)	<input type="checkbox"/> Theatre (Touring) <input type="checkbox"/> Commercials <input type="checkbox"/> Overseas work <input type="checkbox"/> Voiceover/Radio

Signed (Parent Guardian) \_\_\_\_\_

Print Name \_\_\_\_\_

Date: \_\_\_\_\_