

Eagan High School

“THE AUDITION”



**For grades 5, 6, 7, 8, & 9
(2026-2027 school year)**

**Monday - Friday
June 22 - 26, 2026**

**5 Days
12:30 - 3:30 PM**

"THE AUDITION" is designed specifically for students in grades 5-9 during the 2026-2027 school year. Campers need not have attended previous camps, but will certainly benefit from the skills learned in the Performing Arts Camp process. During this five day camp, we will address the skills students need to audition for musicals and plays in school and the Twin Cities theatre scene. In this comfortable setting students and highly qualified college student staff will focus on:

- Vocal solos and sight reading
- Monologues, "cold" reading, and partnered scene reading
- Solo and group dance genres often used in audition settings
- Developing confidence in the audition process
- Adjusting and adapting to director requests

Students will work in the familiar small-group classes with staff who have extensive experience both in their performing fields and in the audition environment, to develop a portfolio of audition materials. Students will also have the benefit of a mock audition process as the culmination of the camp. There will be a showcase on Friday at camp at 2:30 PM.

Camp Dates: Monday, June 22 - Friday, June 26 (5 days)

Camp Times: 12:30 PM - 3:30 PM

Showcase: June 26 @ 2:30 PM

Camp Location: Eagan High School Performing Arts Areas

Music and Dance rooms (use east entrance, Door 40)

Camp Cost: \$150 per camper

Cost includes portfolio material and a Camp T-shirt

Please provide an email address for confirmation of registration.

Camp Questions? Please contact the Camp Coordinator:

Erin Kelly - em8kelly@gmail.com

Use QR Code Link for online registration OR www.eagan.k12.mn.us

Payments can be made on Edutrak for district 196 students.

Registration and check payment can be mailed if you do not have access to Edutrak.

Eagan High School Audition Camp, 4185 Braddock Trl, Eagan, MN, 55123

Attn: Amy Johnson, Arts Secretary



2026 EHS "The Audition" Registration

Camper Name: _____ Camper Grade (26-27 school year): _____

Parent/Guardian: _____ Email: _____

Address: _____ City, State, Zip: _____

Primary Phone: _____ Secondary Phone: _____

My Child will: walk _____ Be picked up by _____

Emergency Contact Person: _____ Phone: _____

T-Shirt size: Youth sizes - Small _____ Medium _____ Large _____

Adult sizes - Small _____ Medium _____ Large _____ X-Large _____

Check made payable to: Eagan High School

For Office Use Only: Check# _____ Amount _____ Date Recieved _____