

SNJ Singers
AUDITION APPLICATION

Name

Home Phone

Cell (optional)

Address

City/State

Zip

School

Grade (fall of 2010)

Parent/Guardian Name(s)

Home Phone

Cell

Parent E-Mail (important!)

Student E-Mail (optional)

Voice Type: S A T B

Please list ensembles you currently participate in at school:

Please list ensembles you currently participate in outside of school:

List past experiences in vocal music (lessons, musical roles, honor choirs, awards):

Please Read Carefully and Check If Agreed:

_____ I am available for rehearsals every Sunday from 5:30-700.

_____ I am able to commit to rehearsals and performances for the entire 2010-2011 season.

_____ I understand that there is a fee of \$298 for SNJ Singers.

Payment in full will be due by first rehearsal, August 22. (Please contact Mr. Johnston if this presents a problem).

Student Signature

Date

Parent Signature

Date