2024-2025 SNJ Singers AUDITION APPLICATION - PLEASE RETURN TO joeljohnston@cox.net

Name	Cell	
Address	City/State	Zip
School	Grade (Fall of 2024)	
Parent/Guardian Name(s)	Parent Cell	
Parent E-Mail	Student E-Mail	(personal, not school)
Voice Type: S A T B		
Please list music groups and activities (including r	musicals) you currently pa	articipate in at school:
Please list music groups you currently participate	in outside of school:	
List past experiences in vocal music (lessons, mu	sical roles, honor choirs, a	awards):
Please Read Carefully and Check If Agreed	d:	
I am available for rehearsals every Sur	nday from 5:00-6:30.	
I am able to commit to rehearsals and	performances for the entir	e 2024-25 season.
I understand that there is a fee of \$399 (\$319 for tuition plus \$80 for outfit)	for SNJ Singers	
Tuition Payment Options:		
Pay in full: \$399 due at first rehearsa	al.	
4 monthly installments of \$99.75 bille	ed to a credit/debit card in	Aug, Sep, Oct, Nov 2024
Student Signature		Date
Parent Signature		Date