CHORAL AUDITION FORM

Date_____

Name _____
(Last) (First) (Middle)

Age: _____ Birth date: _____ Height: _____ Hometown: _____ State: ____

Local Address: _____

Local/Cell.Phone: _____ Email: _____

University Classification: _____ Major: _____

Choral Experience (list School, Ensemble, Duration): _____

_____

Voice Training (List Type, Teacher, Duration): _____

_____

Will you study voice this semester? _____ With whom? _____

List all instruments you play and estimate your proficiency. (beg., int., adv.) _____

_____

List languages you SPEAK (besides English) and estimate proficiency. _____

_____

Choral part normally sung (please circle): S1 S2 A1 A2 T1 T2 B1 B2

Are you willing to sing another choral voice part? _____ Would your voice teacher approve? _____

Are you interested in assisting the choir in a service capacity? _____

Are you willing to attend extra rehearsals? _____ Can you memorize music well? _____

Are you prepared to assume the expense of the required choir uniform? _____

Can you sight-sing your part without help? (circle one) Not at all Somewhat Mostly Well

List other hobbies, interests, and talents. _____

_____

Ensemble interest? Concert Choir ___ Chamber Singers ___ PV ___ University Chorus ____