

PHC-Youth Music Academy Choir Audition Form

Name _____ Grade _____

Birthdate ____/____/____ Age _____

Address: Street, City, State/Zip Code

Home Phone _____ Cell Phone _____

Parents' names _____

Parent Email _____

Parent phone (Work) _____ (Cell) _____

Have you sung in a choir before? _____ If yes, what voice part(s) have you sung? _____ Choral experience:

List any instruments played and the length of time you have played/studied:

Private voice lessons? _____ How long? _____ Solos sung? (describe) _____

Home church attended _____ How long? _____

Languages you have studied? _____ How long? _____

Years home schooled _____

Hobbies/interests/talents _____

(For Director only)

Date of Audition _____

Range _____ P 1 2 3 4 5 N

"Amazing Grace/My Country, 'Tis of Thee" S 1 2 3 4 5 N

VA 1 2 3 4 5 VC 1 2 3 4 5 S _____ T _____ V _____

