

# Music Audition Form

Name \_\_\_\_\_

Number

Age \_\_\_\_\_

Please circle the types of music experience that you have:

Church choir

School chorus

Musical Theater

Band

Private Instrument Lessons

Voice lessons

Other \_\_\_\_\_

Length of time you participated: \_\_\_\_\_

Have you sung a harmony part before?

Yes

No

Do you know your voice part? If so, please circle.

Soprano

Alto

Tenor

Baritone

Bass

**Any Additional Information/Explanation:** \_\_\_\_\_

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**AREA BELOW RESERVED FOR NOTES BY PRODUCTION STAFF**

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