CHORALIS
Gretchen Kuhrmann, Artistic Director

Cantus Youth Choirs – 2011-2012 Audition Form

Singer's Name:_____
(Last) *(First)*

Grade in School for 2011-2012: _____ Birthday:_____
(dd-mm-yyyy)

School: _____

Singer's Cell Phone: (optional) _____ Do You Text Message? Yes No

Voice Part: (circle whichever applies) S1 S2 A1 A2 T B unknown

Singer's E-mail Address:

Parent /Guardian: _____
(Last) *(First)*

Address: _____
(Number and Street) *(City)* *(State)* *(Zip)*

Daytime Phone: _____ Evening/Cell Phone: _____

Parent's E-mail Address:

How did you hear about Choralis? _____

Please list other choral experience, if any, your child has had in the past.

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