

YOUTH HONORS CHORAL PROGRAM APPLICATION

PLEASE PRINT:

Student Name _____

Parents/Guardian Name _____

Home Phone _____ Cell Phone _____

E-mail Address _____

Work Phone - Mom _____ Work Phone – Dad _____

(include St., Ave., Rd, etc.)

Address _____

City _____ Zip Code _____

School _____ Grade in 2011/2012 _____

Are you a member of your school choir/orchestra/band? Yes _____ Which? _____

Are you a former YHCP member? _____ # of years _____

Optional:

What instrument does student play? _____

Other musical, dance or stage experience

Check if applicable:

Singers Group - grades 3-5 in fall 2011– will be divided into two sessions. We will do our best to accommodate parent’s choice.

I want my child in: _____ Group A – rehearsing from 4:30-5:10

_____ Group B – rehearsing from 5:20-6:00

_____ I have no preference

Parent/ Guardian signature _____ date _____

School/ church music director _____ date _____