

# Hendersonville All County High School Choir Audition Form

Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

City, State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Parent or Guardian \_\_\_\_\_ Parents Email: \_\_\_\_\_

Current Year: Fr. So. Jr. Sr. Voice part you sing (you may circle more than 1): Soprano Alto Tenor Bass

Instruments Played (and how long): \_\_\_\_\_

Previous Choral Experience (please list name of group and teacher) \_\_\_\_\_

Have you taken private voice lessons? Yes or No Name of Voice Teacher: \_\_\_\_\_

Do you currently sing or perform with any other groups? (list) \_\_\_\_\_

What Arts related courses have you taken in High School? (Ex: drama, band, chorus) \_\_\_\_\_

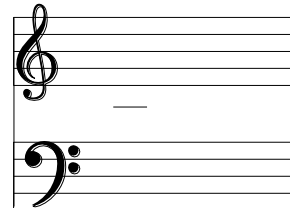
Parent Permission: I hereby give permission for my child to participate as a member of the Carolina Concert Choir All-County High School Chorus, if selected as a result of this open audition process. Further, I will support my child and the chorus by reviewing and agreeing to the Student Contract that will be signed prior to the first rehearsal.

Signed by Parent or Guardian \_\_\_\_\_ Date: \_\_\_\_\_

**STOP HERE (do not complete anything below this line)**

Key (1 = low, 5 = high)

- |                    |   |   |   |   |   |
|--------------------|---|---|---|---|---|
| 1. Vocal Solo      | 1 | 2 | 3 | 4 | 5 |
| 2. Choral Excerpt: | 1 | 2 | 3 | 4 | 5 |
| 3. Scale:          | 1 | 2 | 3 | 4 | 5 |
| 4. Sight-Singing:  | 1 | 2 | 3 | 4 | 5 |
| 5. Range:          | 1 | 2 | 3 | 4 | 5 |
| 6. Tone Quality:   | 1 | 2 | 3 | 4 | 5 |
| 7. Intonation:     | 1 | 2 | 3 | 4 | 5 |



Accepted? \_\_\_\_\_ Voice Part Assigned: \_\_\_\_\_