

# Choral Studio Choral Information Form

Date (MM/DD/YY) \_\_\_\_\_

**Please Print Clearly**

First Name
Middle Initial or Middle Name
Family Name (Last Name)
Nickname (if you prefer one)
Number and Street
Apartment
City
State
Zip
Home Phone, with area code ( )
Office Phone, with area code ( )
Pager or cell phone (optional), with area code ( )
<b>Home e-mail</b>
<b>Office e-mail</b>
Name of employer
Occupation

Voice Part Identification: Name all voice parts you have sung, if more than one.
How well do <b>you</b> think you read music? (Scale: 1= not at all to 10= flawlessly) <b>Circle one.</b> 1 2 3 4 5 6 7 8 9 10
Self-taught experience. Name the instrument (including voice) and number of years you have played.
Instrument: _____ Instrument: _____ Instrument: _____ Years: _____ Years: _____ Years: _____
Private music instruction experience: Name the instrument (including voice) and number of years of instruction.
Instrument: _____ Instrument: _____ Instrument: _____ Years: _____ Years: _____ Years: _____

Why do you want to be in this choir?					
How did you learn about this choir?					
List prior choral experiences <b>since</b> high school.					
Did you sing in HS? <b>Yes No</b> Name of high school and city. Include choir director's name if you can.					
What other choir(s) are you involved with currently?					
Do you have any health issues that might affect your singing or standing while singing? Examples: asthma, allergies, back injury, arthritis. Only general information is necessary.					
Are you available on Mon, Tue, or Thu evenings? (circle all that apply)					
Monday	<b>Yes No</b>	Tuesday	<b>Yes No</b>	Thursday	<b>Yes No</b>