

JUNIOR FRIDAY MORNING MUSICALE
AUDITION FORM

Student Name _____ Audition Date _____

Address _____ Phone _____

Birthdate _____ Age Now _____ Instrument _____ Length of Study _____

School _____ Grade _____ Teacher _____ Phone _____

Beginning Student: Which major scale and arpeggio will be played? _____

More Advanced Student: Which Mj. & Min. scale and arpeggio played? _____

Solo/Composer _____

Solo/Composer _____

Judges' Comments _____

Full Member _____ Provisional Member _____ Dues Paid _____

N.B. The Audition Chairman needs to receive this form at least **one week** prior to audition!
