The Dickson Community Choir Information Sheet

Name:	Grade (children only):			
Address:				
ity: County:				
Main Phone Number:				_
Email Address:				
For which choir are you auditioning? (Or	for which ch	oirs are yo	ou currently a m	ember?)
Training Choir Children's	s Choir	L Cha	amber Choir	Community Choir
Which groups were you a member of las	t year?			
Training Choir Children	's Choir	Ch	amber Choir	Community Choir
ADULTS ONLY: What is your vocal part	?			
Soprano Alto Te	enor	Bass		
CHILDREN ONLY: What is your t-shirt s	ize?			
Youth XS Youth S	Youth	n M [Youth L	Youth XL
Adult XS Adult S	Adult	м [Adult L	Adult XL
Amount Paid:				
By enrolling yourself or your child/children photographs of you, your child/children, or marketing, or social media in any form or	or your family			
Signature: Date:				
D	IRECTOR'S	USE ONL	.Y:	
Vocal Range: Pitch Memory: _		Sight Read	ing (Chamber au	ditions):
Selected for: Training Childre	en's	Chamber	Commu	unity