



Auditioning Singer's Contact and Profile Information 2019-2020

Please print legibly or type. Bring two completed copies of this form to your audition.

Audition Date: _____

I am auditioning for: Concert Chorus _____ Masterworks Chorus _____

Voice Part: Soprano 1 _____ Soprano 2 _____ Alto 1 _____ Alto 2 _____
Tenor 1 _____ Tenor 2 _____ Baritone _____ Bass _____

Name (Last, First, Middle): _____

What is your preferred pronoun (please circle one)?

she/her he/him they/them other _____

Birthday (Month, Day): _____/_____ Height (Feet, Inches): _____' _____"

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____

Email address: _____

Occupation(s): _____

Education/Degree(s): _____

Previous singing experiences (collegiate, community, solo performance, etc.):

Other musical performance experiences (instrumental):

Language(s) you speak fluently: _____

How did you hear about APM? _____

Would you like to learn more about volunteer opportunities with APM? Yes _____ No _____

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