



## WCMS Chamber Ensemble Audition Form: Fall 2021

Date \_\_\_\_\_ Full Name \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_

Address \_\_\_\_\_ Phone# \_\_\_\_\_

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

Grade \_\_\_\_\_ Age \_\_\_\_\_ Instrument \_\_\_\_\_ Length of study \_\_\_\_\_

Private Teacher \_\_\_\_\_ Teacher Phone # (if not WCMS) \_\_\_\_\_

How did you hear about this program? \_\_\_\_\_

Please list the titles and composers of your audition pieces:

Please list the repertoire you have learned in the past year (or method book you are currently in):

Please list the scales that you have learned to play (including number of octaves):

Do you have prior ensemble experience, either small or large group? If yes, please describe, including specific repertoire you have played:

Please check the boxes next to any days/times that you are available for weekly coachings during the fall semester. (Note: Greater flexibility in your schedule will increase the likelihood of being placed in a group).

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Monday afternoons  | <input type="checkbox"/> Wednesday afternoons | <input type="checkbox"/> Friday afternoons   |
| <input type="checkbox"/> Monday evenings    | <input type="checkbox"/> Wednesday evenings   | <input type="checkbox"/> Friday evenings     |
| <input type="checkbox"/> Tuesday afternoons | <input type="checkbox"/> Thursday afternoons  | <input type="checkbox"/> Saturday mornings   |
| <input type="checkbox"/> Tuesday evenings   | <input type="checkbox"/> Thursday evenings    | <input type="checkbox"/> Saturday afternoons |