

2010 TREBLE SONG HONOR CHOIR Audition Form

SSA Honor Choir sponsored by The Mississippi Girlchoir

The entry deadline is September 30, 2009. No exceptions.

AGE and VOICE REQUIREMENTS

Treble voices, in grades 7-12, currently enrolled in a choral program, are eligible to audition. Those who are accepted must be accompanied by a chaperone.

Send separate audition forms and audition tapes for each applicant. Exception: students from the same school or organization may record their auditions consecutively on one tape. There is no limit to the number of applicants from a single school or institution. **Each audition application must include a \$15 non-refundable audition fee, check or money order payable to the Mississippi Girlchoir.** Organizations may submit one check for multiple applicants. **The entry deadline is September 30, 2009.** Entries postmarked after that date will not be accepted. No exceptions.

PLEASE COMPLETE EVERYTHING ON THIS FORM:

Type or print legibly.

Applicant's Name: _____

Street, City, State, Zip: _____

School: _____ Phones (home, cell): _____

Grade: _____ Height (inches): _____ Preferred Voice Part (circle one) S1 S2 A1 A2
(S2 and A1 will sing soprano 2 in 3-part voicing)

Range: Lowest note _____ Highest note _____

T-Shirt (adult sizes) S M L XL XXL

SINGER'S STATEMENT OF OBLIGATION

We have read the guidelines and audition forms and fully understand that selection for the 2010 Treble Song.

A Honor Choir brings with it both musical and financial obligations. We understand that as a member of the Treble Song, the applicant must pay a **\$85 non-refundable participation fee** and that the Mississippi Girlchoir is not responsible for costs of the applicant's transportation, lodging, or meals. **We also understand the applicant must attend all Treble Song rehearsals on February 18, 19, 20.** Each applicant will be committed to fully prepare **and memorize** the music according to the instructions included in the packet.

Applicants Signature: _____ Date: _____

Signature of parent/guardian: _____ Date: _____

Director Information:

THIS ADDRESS WILL BE USED TO MAIL MUSIC

Name: _____

Street, City, State, Zip: _____

Phones (home, work, cell): _____

E-Mail Address: _____ Sponsor: _____