

Mr/Mrs/Miss/Ms/Dr First name/s _____

Surname _____

Address _____

_____ Postcode _____

Telephone Numbers: Home _____ Mobile _____ Business _____

Email _____

Occupation (optional) _____

Choral Experience/ Vocal Tuition (if any)

Voice part/range _____

How did you hear about the choir? _____

Do you have particular skills you could make available to the choir? (Please feel free to fill in the accompanying
Volunteer sheet) _____I hereby undertake that, if this application is approved, I will conform with the rules of the Choir as laid
down in its Constitution and Regulations and will seek to further the Choir's interests.

Signature _____

Please complete then print out and bring to your first rehearsal or email to info@citychoir.co.nz***Music Director to complete*****AUDITION**

I have tested the voice and musical ability of the above applicant and recommend that the applicant be

Approved / Not Approved (please circle) Voice Part _____

Signature _____ Audition Date _____

Please arrange your audition when you are ready by emailing musicdirector@citychoir.co.nz***Office use***

First Rehearsal Date _____ Second Rehearsal Date _____

Choir Member advised result of audition: Y/N Choir Advised: Y/N Membership details recorded online Y/N

Added to e-mail data base: Y/N

Billing/email Set Up Y/N