



AUDITION/EVALUATION APPLICATION FOR HONOLULU SYMPHONY CHORUS AND HONOLULU CHAMBER CHOIR

FILL THIS FORM OUT **COMPLETELY** AND BRING IT TO YOUR AUDITION/EVALUATION
[MUST BE AT LEAST 18 YEARS OF AGE OR A HIGH SCHOOL GRADUATE]

NAME (AS YOU WISH IT PRINTED IN PROGRAMS): _____

EMAIL: _____ VOICE PART (CIRCLE ONE): S A T B

HOME PHONE: _____ MOBILE PHONE: _____

MAILING ADDRESS (INC CITY AND ZIP): _____

HEIGHT (FOR STAGING PURPOSES): _____

PLEASE CHECK THE FOLLOWING THAT APPLY TO YOU:

- NEW MEMBER.** ALL NEW MEMBER AUDITIONERS MUST BRING SHEET MUSIC WITH THEM (HYMN, ARIA, ART SONG) TO THE AUDITION. AN ACCOMPANIST WILL BE PROVIDED. ADDITIONAL SINGING WILL BE ASKED FOR TO ASSESS YOUR SIGHT READING ABILITY, VOCAL RANGE, AND VOCAL QUALITY.
- RETURNING SINGER.** I SANG WITH THE HONOLULU SYMPHONY CHORUS IN THE **2008-09 SEASON** AND HAVE BEEN AN HSC MEMBER FOR _____ SEASONS. [IF YOU DID NOT SING WITH US IN THE 2008-09 SEASON, YOU SHOULD INDICATE YOURSELF AS A "NEW MEMBER".]
- HONOLULU CHAMBER CHOIR.** I AM INTERESTED IN BEING CONSIDERED FOR THE HONOLULU CHAMBER CHOIR. ALL MEMBERS OF THE HONOLULU CHAMBER CHOIR MUST ALSO BE MEMBERS OF THE HONOLULU SYMPHONY CHORUS. THOSE SERIOUSLY CONSIDERED BY THE ARTISTIC DIRECTOR FOR THE HONOLULU CHAMBER CHOIR WILL BE REQUIRED TO ATTEND A CALL-BACK AUDITION.

EDUCATION:

HIGH SCHOOL _____ COLLEGE _____

DEGREES/CERTIFICATES _____

DESCRIBE YOUR MUSICAL TRAINING, INVOLVEMENT AND/OR EXPERIENCE:

VOCAL _____

INSTRUMENTAL _____

CHORAL _____

(CONTINUE ON REVERSE SIDE)

INDICATE YOUR CHOICES FROM THE DATES AND TIMES BELOW FOR A 10-15 MINUTE AUDITION/EVALUATION APPOINTMENT. YOU WILL BE CONTACTED WITH A MORE SPECIFIC TIME. YOU MAY SIMPLY E:MAIL YOUR PREFERENCES TO SYMPHONYCHORUS@GMAIL.COM AND BRING THIS COMPLETED FORM WITH YOU TO YOUR AUDITION/EVALUATION.

JULY & AUGUST 2009

MON 7/27	WED 7/29	FRI 7/31	MON 8/10	WED 8/12	FRI 8/14
10AM – 1PM 2 – 5:15 PM	1 – 4:45 PM 6 – 8:45 PM	10AM – 1PM 2 – 5:15PM	10AM – 1PM 2 – 5:15PM	1 – 4:45 PM 6 – 8:45 PM	10AM – 1PM 2 - 5:15 PM

AUDITIONS/EVALUATIONS WILL TAKE PLACE AT THE CATHEDRAL CHURCH OF ST. ANDREW, DAVIES HALL, LOCATED AT THE CORNER OF BERETANIA AND QUEEN EMMA STREETS IN HONOLULU. DAVIES HALL IS ON THE EWA (WEST) SIDE OF THE CATHEDRAL, ADJACENT TO QUEEN EMMA STREET.

PLEASE HELP US GET TO KNOW YOU:

1. WHY DO YOU WANT TO SING WITH THE HONOLULU SYMPHONY CHORUS?

2. THE MISSION OF THE O`AHU CHORAL SOCIETY IS TO PRESENT AND PROMOTE CHORAL MUSIC AT THE HIGHEST ARTISTIC LEVEL FOR THE CULTURAL ENRICHMENT, EDUCATION, AND AESTHETIC ENJOYMENT OF ITS MEMBERS, THE PEOPLE OF HAWAI`I, AND THE GLOBAL COMMUNITY. WHY IS THIS IMPORTANT TO YOU?

3. WHAT IS YOUR FAVORITE CHORAL/ORCHESTRAL WORK?

4. THERE IS A NEED THROUGHOUT THE SEASON FOR HELP WITH VARIOUS FUNDRAISERS (COMMITTEES, SILENT AUCTION, ANNUAL DINNER, ETC.), CONCERT ASSISTANCE (TRANSPORTATION, SET-UP/CLEAN-UP, PROGRAMS, ETC.), AND OTHER NEEDS. HOW DO YOU PLAN TO CONTRIBUTE/HELP?

5. WHAT LANGUAGE(S), IF ANY, DO YOU SPEAK BESIDES ENGLISH?

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE REVIEWED AND AGREE TO ABIDE BY THE HONOLULU SYMPHONY CHORUS MEMBERSHIP, ATTENDANCE, AND CONCERT ATTIRE POLICIES. I HAVE ALSO REVIEWED THE CONCERT SCHEDULE FOR THE 2009-10 SEASON AND **BY MY SIGNATURE BELOW I COMMIT MYSELF TO ATTENDING ALL REHEARSALS AND PARTICIPATING IN ALL CONCERTS** EXCEPT UNDER CIRCUMSTANCES THAT ARE NOT WITHIN MY CONTROL AND/OR FOR WHICH I OBTAIN PRIOR APPROVAL FROM THE ARTISTIC DIRECTOR.

SIGNATURE OF APPLICANT

DATE