



# 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). AN ACCOMPANIST WILL BE PROVIDED. ADDITIONAL SINGING WILL BE REQUESTED TO ASSESS YOUR SIGHT READING ABILITY, VOCAL RANGE, AND VOCAL QUALITY.
- RETURNING SINGER.** I SANG WITH THE HONOLULU SYMPHONY CHORUS IN THE PREVIOUS SEASON AND HAVE BEEN AN HSC MEMBER FOR \_\_\_\_\_ SEASONS. [IF YOU DID NOT SING WITH US IN THE PREVIOUS SEASON YOU SHOULD DESCRIBE YOURSELF AS A NEW MEMBER, SEE PARAGRAPH ABOVE.]
- 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)

PLEASE CHECK OUR WEB SITE [WWW.OAHUCHORAL.ORG](http://WWW.OAHUCHORAL.ORG) FOR AUDITION DATES. CONTACT US AT [INFO@OAHUCHORAL.ORG](mailto:INFO@OAHUCHORAL.ORG) OR PHONE 808-735-4311 TO SCHEDULE A TIME FOR YOUR AUDITION.

PLEASE HELP US GET TO KNOW YOU:

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

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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?

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3. WHAT IS YOUR FAVORITE CHORAL/ORCHESTRAL WORK?

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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 CAN YOU CONTRIBUTE/HELP?

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5. WHAT LANGUAGES, IF ANY, DO YOU SPEAK BESIDES ENGLISH?

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**BY MY SIGNATURE BELOW I COMMIT MYSELF TO ATTENDING ALL REHEARSALS AND PARTICIPATING IN ALL CONCERTS EXCEPT UNDER CIRCUMSTANCES BEYOND MY CONTROL AND/OR FOR WHICH I OBTAIN PRIOR APPROVAL FROM THE ARTISTIC DIRECTOR.**

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SIGNATURE OF APPLICANT

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DATE