

## Audition Form for VPA Choirs & Dance

Student Name (First & Last)	Gender M/F
Student Email	Student Phone/Text
Name of School	Grade 2018-2019

Parent/Guardian Name (First & Last)	Phone
Parent/Guardian Email(s)	

**Experience:**

Singing (please include choir and/or voice lessons)
Dance (please list style and number of years)
Instrumental (please list instrument and number of years)
Other performing experience such as theatre

Please list any known scheduling conflicts \_\_\_\_\_

Class(es) you are most interested in participating in \_\_\_\_\_

**Agreement/Expectations:**

<p><i>Please understand</i> the goal of the VPA choirs is to educate and give students the opportunity to grow as musicians and performers. Students at similar talent and skill levels will be grouped together for maximum growth and achievement of each choir.</p> <p>If chosen to participate in a VPA choir I will:</p> <ul style="list-style-type: none"> <li>● Be attentive and focused during rehearsals.</li> <li>● Demonstrate a good attitude and a willingness to work hard and follow instructions.</li> <li>● Arrive on time and attend all rehearsals with no more than TWO absences per term.</li> <li>● Stay in the rehearsal or performance space at all times and to be respectful of other groups rehearsing as well as the owners of the facilities.</li> <li>● Have reliable transportation after class within 10 minutes of release.</li> <li>● Wear required performance attire and take proper care of VPA wardrobe items.</li> <li>● Participate in the December Christmas Concert and the May Spring Concert and preceding tech/dress rehearsals.</li> </ul> <p>If there anything else you'd like VPA to know about your goals or expectations please share on the back of this page.</p>
---

I have read and understand the above.

Date of Audition \_\_\_\_\_

Student Signature \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_