



Angel City Chorale Auditions

Singer Information Form

Name: _____ Occupation: _____

Home Address: _____

City, Zip: _____

Phones: Home _____ Cell _____

Email: _____ Birthday: _____ (Just the month & day. So we can celebrate you!)

What part do you sing? _____ Height: _____ (for concert order)

How would you rate your sight reading skills? (Excellent, Good, Fair, Poor) _____

Previous singing experience: Please include any choral, solo work, or musical education.

Do you play an instrument(s)? _____

Are you interested in solo opportunities? Yes No Maybe

Are you interested in Chamber Ensemble?
(Smaller group doing more challenging music) Yes No Maybe

Angel City runs on volunteer talent and energy. Do you have any special (or even very ordinary!) skills you'd be willing to contribute to the choir?

How did you hear about the Angel City Chorale? _____

Anything else you think we should know about you?

Thanks for auditioning!