



## Salina Youth Symphony Audition Form

Returning Member? Yes \_\_\_ No \_\_\_

Name: \_\_\_\_\_ Grade in School: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Student's School: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Student Cell: \_\_\_\_\_

Student E-mail Address: \_\_\_\_\_

Name(s) of Parent(s)/Guardian(s): \_\_\_\_\_

Father Cell: \_\_\_\_\_ Mother Cell: \_\_\_\_\_

Father Work: \_\_\_\_\_ Mother Work: \_\_\_\_\_

Parent's E-mail Address(es): \_\_\_\_\_

Instrument? \_\_\_\_\_ How long have you been playing? \_\_\_\_\_

Do you take private lessons? \_\_\_\_\_ If yes, who is your teacher? \_\_\_\_\_

Title of your Selection \_\_\_\_\_ Composer \_\_\_\_\_

**IMPORTANT! Please fill out back side of form.**

**(Do Not Write Below This Line - To be Completed by Directors)**

Tone Quality \_\_\_\_\_

Intonation \_\_\_\_\_

Musicality \_\_\_\_\_

Note Accuracy \_\_\_\_\_

Scale \_\_\_\_\_

Sight Reading \_\_\_\_\_

Youth Symphony

Jr. Youth Symphony

Preparatory Orchestra

**TO BE COMPLETED BY PARENT/GUARDIAN OF YOUTH SYMPHONY MEMBERS  
UNDER AGE 18:**

**CONSENT TO USE OF NAME AND IMAGE, VOICE RECORDINGS**

I, being parent/guardian of \_\_\_\_\_, hereby consent that my child's name, image and likeness, as shown in videotapes, photographs, film and/or electronic images in which he/she appears, and/or audio recordings made of his/her musical instrument performance may be used by the Salina Symphony and/or Salina Symphony Guild in whatever way they desire, including public relations, promotional materials and publications, websites and television. Furthermore, I hereby consent that such photographs, films, recordings, electronic images, and the plates, tapes and/or software from which they are made shall be the sole property of the Salina Symphony and that they shall have the right to sell, duplicate, reproduce and make other uses of such photographs, films, recordings, electronic images, plates, tapes and software as may be desired free and clear of any claim whatsoever on my part.

\_\_\_\_\_

Parent/Guardian Printed Name

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

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**TO BE COMPLETED BY YOUTH SYMPHONY MEMBERS *AGE 18 & OLDER*:**

**CONSENT TO USE OF NAME AND IMAGE, VOICE RECORDINGS**

I, \_\_\_\_\_, hereby consent that my name, image and likeness, as shown in videotapes, photographs, film and/or electronic images in which I appear, and/or audio recordings made of my musical instrument performance may be used by the Salina Symphony and/or the Salina Symphony Guild in whatever way they desire, including public relations, promotional materials and publications, websites, and television. Furthermore, I hereby consent that such photographs, films, recordings, electronic images, and the plates, tapes and/or software from which they are made shall be the sole property of the Salina Symphony and that they shall have the right to sell, duplicate, reproduce and make other uses of such photographs, films, recordings, electronic images, plates, tapes and software as may be desired free and clear of any claim whatsoever on my part.

\_\_\_\_\_

Signature

\_\_\_\_\_

Date