

MAGIC VALLEY SYMPHONY

2012 YOUTH SOLOIST AUDITION APPLICATION FORM

WHEN: SATURDAY, JUNE 9, 2012, 12:00 – 5:00 PM

WHERE: Canyon Ridge High School, Twin Falls, Idaho

PLEASE PRINT PLAINLY OR TYPE:

NAME: _____ AGE: _____

MAILING ADDRESS: _____ PHONE: _____

CITY, STATE, ZIP: _____

EMAIL: _____

PARENTS' NAME(S): _____

NAME OF SCHOOL NOW ATTENDING: _____

INSTRUMENT OR VOICE RANGE: _____

TITLE OF MUSIC TO BE PERFORMED: _____

COMPOSER: _____ PUBLISHER: _____

APPROXIMATE DURATION IN MINUTES: _____

RECOMMENDED BY:

(Teacher's Signature)

TEACHER'S NAME: _____

TEACHERS'S ADDRESS: _____

TEACHER'S CITY, STATE, ZIP: _____

TEACHER'S PHONE: _____

TEACHER'S EMAIL: _____

PLEASE ENCLOSE A NON-REFUNDABLE ENTRY FEE OF \$5.00.

MAKE CHECKS PAYABLE TO: MAGIC VALLEY SYMPHONY.

RETURN FORM BY **MAY 11, 2012** TO:

Doug Wangen
Vice President, Magic Valley Symphony
1886 Floral Ave.
Gooding, ID 83330
(208) 420-8636 or (800) 574-4409 days
dougcorey@cableone.net