Registration for Community Choir

**Student Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Student First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Birthdate**  **/****/**  Today’s Date: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

        *month/day/year*

**Parent/Guardian Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Best Time to reach you? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*Apt, Fl, etc.* **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Best Way to reach you? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*C,S,Z*  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** *(Email, Phone, etc.)*

**Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Social Media address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**In case of medical emergency contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*(name and phone number)*

**Relationship of emergency contact to the Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*(mother, father, grandmother, aunt, etc)*

**Daytime Phone:** (   )     -      **Evening Phone:** (   )     -

**T-**Shirt size \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (10, 12, 14, 16, 18. S, M, L, XL, boys, girls, misses)

**Pants/Skirt size\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1) What school do you attend? **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

2) Are you a beginner? *(If yes skip to question #7)* **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

3) How long have you been singing? *(weeks, months, years)* **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_

4) Have you had formal training? *(If no skip to question #7)*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5) Where did you train? *(School, Church, etc)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6) How long did you train? *(weeks, months, years)*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7) What style of music do you enjoy? *(****X*** *one or more)*

[ ] Gospel [ ] Jazz  [ ] Country [ ] R&B  [ ] Classical

[ ] Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ] Neo/Soul [ ] Pop