## 30th Anniversary Season

## **GLENDALE YOUTH ORCHESTRA**

## Season Application 2018-2019

Name	DOB
Student Email	Student Cell
School Grade for 2018/19Scho	ol
Home Phone	Parent Cell
Home Address	CityZip
Parent/Guardian's Name	Occupation
EmployerEm	ail
Parent/Guardian's Name	Occupation
EmployerEm	ail
Instrument	Length of study
Private Music Teacher's Name	
Phone Email_	
Band/Orchestra Director	
PhoneEmail_	· · · · · · · · · · · · · · · · · · ·
Study and training (include teachers, school	s/camps, orchestras, competitions, etc.
How did you hear about the GYO?	riend Music Teacher
Website Other	
website other	
A Scholarship? Yes No	
Please consult all your activity calendars Check the box next to each concert tha	to ensure that you can commit to ALL the following concert dates. t you are available for:
Sunday, Nov. 1	8 <sup>th</sup> Sunday Mar. 10 <sup>th</sup> Sunday, May 19 <sup>th</sup>

Please email or mail completed application and check for \$30

You will be contacted by email with your audition date & time

(non-refundable audition fee) payable to:

Glendale Youth Orchestra

P.O. Box 4401 Glendale, CA 91222-0401 Questions: gyo@earthlink.net