

Name _____ DOB _____

Student Email _____

School Grade for 2017/18 _____ School _____

Home Phone _____ Parent Cell _____

Home Address _____ City _____ Zip _____

Parent/Guardian's Name _____ Occupation _____

Employer _____ Email _____

Parent/Guardian's Name _____ Occupation _____

Employer _____ Email _____

Instrument _____ Length of study _____

Private Music Teacher's Name _____

Phone _____ Email _____

Band/Orchestra Director _____

Phone _____ Email _____

Study and training (include teachers, schools/camps, orchestras, competitions, etc.)

How did you hear about the GYO? Friend _____ Music Teacher _____

Website Other _____

Continuing Student New Student

Financial Scholarship? Yes No

Please consult all your activity calendars to ensure that you can commit to ALL the following concert dates. Check the box next to each concert that you are available for:

Sunday, Nov. 24^h Sunday Mar. 8th Sunday, May 17th

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