

# BRAZOSPORT SYMPHONY ORCHESTRA

## Young Artist Competition Application 2016-2017 Season

Please type/print all information legibly.

Applicant Name: \_\_\_\_\_

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

Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ School: \_\_\_\_\_

Instrument / Voice Part: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Parent E-mail: \_\_\_\_\_ Telephone: \_\_\_\_\_

### **Music Teacher(s):**

School Instructor: \_\_\_\_\_ Tel: \_\_\_\_\_

Private (if applicable): \_\_\_\_\_ Tel: \_\_\_\_\_

### **Instrumental Audition Music:**

Composer: \_\_\_\_\_ Title: \_\_\_\_\_

Movement # and Title (for concertos): \_\_\_\_\_ Length of selection: \_\_\_\_\_

### **Vocalist Audition Music:** *Vocalists may audition on up to 2 selections which meet criteria.*

Composer: \_\_\_\_\_ Title: \_\_\_\_\_

Key: \_\_\_\_\_ Other Information, i.e. if from an opera, etc.: \_\_\_\_\_

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Key: \_\_\_\_\_ Other Information, i.e. if from an opera, etc.: \_\_\_\_\_

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Answers may be on a separate sheet of paper if needed.

Please list performance experience(s):

What are your career goals and future plans?

Where do you plan to study after high school?

Please list activities, honors, achievements:

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_

Music Teacher Signature: \_\_\_\_\_

Application fee of \$15 should be made payable to Brazosport Symphony.

**Mail application and fee to:**                      **BSO Young Artists Competition**  
**The Center for the Arts & Sciences**  
**400 College Blvd.**  
**Clute, Texas 77531**

**Applications must be received no later than 5:00 p.m. on March 17, 2017.**

<b>For Brazosport Symphony Use Only:</b>		
Date received:	Payment method:	Check No.:
Audition Time:	Applicant contacted:	