



San Antonio Choral Society Audition Form

Name: _____ Telephone #: _____

Address: _____ Email: _____

_____ Zip Code: _____

Professional career/ academic major in school (i.e. teacher, etc.): _____

Voice classification (if known): S1 S2 A1 A2 T1 T2 B1 B2

Please list any previous singing experience, i.e. school, church, or community choirs, awards/competitions, (include years sung with the San Antonio Choral Society, if applicable): _____

List any instruments you play and how long: _____

Have you studied voice (if yes, with whom and how long): _____

List all languages you can speak/read: _____

******PLEASE DO NOT WRITE BELOW THIS LINE.******

Present this form to the director upon entering the audition room.

Thank you for your interest in the San Antonio Choral Society choral program.

Key (1 = low, 5 = high)

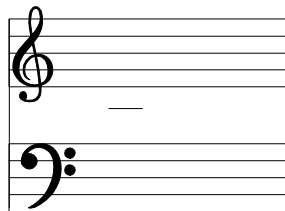
1. Tone Quality: 1 2 3 4 5

2. Intonation: 1 2 3 4 5

3. Musicality: 1 2 3 4 5

4. Sight-Singing: 1 2 3 4 5

5. Melodic Memorization: 1 2 3 4 5



Comments: _____

Accept? _____ Voice Part: _____