

Meistersingers

Audition Form

Please have this form completed for your audition

NAME _____ PHONE (____) _____ - _____

EMAIL (please write clearly) _____

Voice part auditioning for: _____ Volunteer Position OR Staff Position

Past Musical Experience: _____

Song: _____ Composer: _____

PLEASE BRING TWO EXTRA COPIES OF YOUR SELECTION

Why would you like to join Meistersingers? _____

What are your expectations of the ensemble? _____

What do you feel you can contribute toward the success of Meistersingers? _____

Are you interested in being a part of the Meistersingers Community Outreach program? _____

Other talents/skills you would like us to know of? _____

For evaluator use only

Color: 1 2 3 4 5

Intonation: 1 2 3 4 5

Sight-Reading: 1 2 3 4 5

Musicality: 1 2 3 4 5

Tonal Memory: 1 2 3 4 5

Part: S1 S2 A1 A2 T1 T2 B1 B2