

Community Fine Arts Camp 2017

July 17 - 29

Registration Information

Important Registration Instructions: Please read carefully!

- 1. <u>ALL</u> Students must fill out front side of registration form.
- 2. <u>Instrumentalists</u> interested in participating in the CFAC Orchestra <u>must</u> fill out the "Instrumental Audition Form" **on reverse**.
- 3. <u>ALL</u> students must have a parent/guardian's signature confirming their commitment to <u>both</u> weeks and <u>BOTH PERFORMANCES</u> of CFAC.

Name:	Age:
(Please provide name as you wish it to appear on nametag and in the performa	nce program)
Grade Completed:	Gender:
Address:	Zip Code:
Allergies (food/insect/other):	
Medical Conditions (seizures/fainting/other):	
T-shirt size: Adult: S M L XL OR Child: N	/I L Height:
Parent(s) Name(s):	
Primary Phone: Secon	ndary Phone:
Parent E-mail:	(for important camp communications)
Home Church:	
Can you read music? ☐ Yes ☐ No Have you had any fo	rm of private musical instruction? 🗆 Yes 🗀 No
Previous choral/ensemble and solo experience:	
Previous drama experience:	
Previous choreography/dance experience:	
Do you play an instrument? Which one(s)? For how long?:	
Do you participate in a school music program? If so, what?: _	
Emergency Contact (other than parent/guardian):	
•	one:
Preparation and commitment are key to a successful performance. Sparticipate in BOTH performances. (Director may make exceptions in cases of illness.) The	
Parent/Guardian Signature	Date

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Instrumental Audition Form

Important Audition Information:

• Students desiring to play with the CFAC Orchestra on 1 or more songs must participate in instrumental auditions PRIOR to the start of camp, on **Monday**, **July 10**, **at 5:00 pm**.

(If needed, an alternate audition time can be arranged by contacting the director at 327-5921 on or before that date.)

- Students participating in the CFAC instrumental auditions MUST have a *minimum* of one year of school instruction on instrument(s) OR 6 months of private instruction on instrument(s)
- Students should come to auditions prepared to:
 - -Play a scale appropriate for skill level in key of their choice
 - -Play a short piece of their choice
 - -Depending on skill level, student may be asked to sight read music during the audition

Please fill out the following as completely as possible: Instrument(s) played and years of study: _____ Have you had any private musical instruction? \Box Yes \Box No If so, what instrument(s) and for how many years? Previous school orchestra/band or class instruction experience: **Performance experience:** Group(s) and number of years: Solo(s): I understand that my student cannot participate in the CFAC Orchestra unless he/she participates in the precamp auditions on or before July 10. Parent/Guardian Signature Date * FOR OFFICE USE ONLY* Payment Received (Date): Amount: ____ Method (cash, check, online):