

Date: _____

NOVA SINGERS Audition Form

Personal Information (please print clearly):

Name: _____

Address: _____

Profession: _____

Home phone: (_____) _____ - _____

Work phone: (_____) _____ - _____

FAX: (_____) _____ - _____

E-mail: _____

Musical Experience:

Private voice: _____ # of Years: _____

Instrument: _____ # of Years: _____

Piano: _____ # of Years: _____

If placed in the Nova Singers, will you make a commitment to be a faithful member for this year? (September – June): _____

How did you find out about the Nova Singers? _____

PLEASE DO NOT MARK BELOW THIS LINE

Range: _____

Pitch: _____

Overall: _____

Quality: _____

Reading: _____

Voice Part: _____