

WV ALL STATE ORCHESTRA AUDITION FORM

Name: _____ Grade _____

Instrument: _____ (Please indicate violin I or violin II)

Address: _____

Email: _____ Phone: _____

School: _____ Director's Name: _____

Does your school have an orchestra: YES NO

Are you a member of your school orchestra: YES NO

Director's Signature & MENC #: _____

-or-

Sponsor's signature & MENC # _____

Audition fee: \$15 (Please include with application)

Please make checks payable to: Elyse Brandt

Mail to: Elyse Brandt
 93 Eagle Avenue
 Wheeling, WV 26003

Directors: Please feel free to copy this form for your students.

DEADLINE FOR APPLICATIONS: January 9, 2010.

Please note there is a late fee of \$5 for applications received after January 9, 2010.

Official Use Only:
Audition Number: _____
Audition Time: _____
Audition Results: _____
Payment Rec'd: _____
Date Rec'd: _____