



Audition Record

Audition Date: _____

Boy's Name: _____ Age: _____ Birthdate: ____/____/____

Primary Address: _____ Secondary Address: _____

City, ST Zip: _____ City, ST Zip: _____

Phone Number: _____ Phone Number: _____

Ethnic Origin: 1. African American 3. Caucasian 5. Native American
Information requested for grant purposes 2. Asian/Pacific Islander 4. Hispanic 6. Other: _____

Mother/Guardian: _____ Father/Guardian: _____

Workplace: _____ Workplace: _____

Cell Phone: _____ Cell Phone: _____

Work Phone: _____ Work Phone: _____

E-mail: _____ E-mail: _____

Lives at (circle one) : Primary / Secondary Address Lives at (circle one) : Primary / Secondary Address

Boy lives with (check as many as apply) : Mother Father Guardian Other: _____

Boys School: _____ Grade: _____

School Address: _____ School District: _____

School Principal: _____ Music Teacher: _____

How did you learn about the Phoenix Boys Choir?

School Music Teacher Newspaper Direct Mail / Flyer
 Church/Synagogue Music Director Television Internet
 Current PBC Family Radio Other: _____
 PBC Alumnus Word of Mouth _____

Who referred you to an audition?

Name: _____ Affiliation: _____

Have you or your son ever attended a Phoenix Boys Choir concert?

Yes No Approximate Date: _____

OFFICE USE ONLY:

Accepted: Y N

Choir:

Initials:

Paid: Y N

Paid Date: ____/____/____

Entered: ____/____/____

Entered By: