

Uintah Basin Youth Chamber Orchestra

P.O Box 133, Vernal, Utah 84078

Audition Application

E-Mail Address _____ E-Mail Address _____
(parent) (Student)

Student Name _____ Instrument _____

Address _____ Phone _____

City _____ State _____ Zip _____

Parent/Guardian Dr. / Mr. / Mrs. _____
(Circle One) (First & Last Name)

Date of Birth _____ Current Age _____ Grade in School _____
(month / day / year) (Number)

Name of School _____ School Music Instructor _____

Name of Private Teacher _____ Phone _____

I agree to perform in every concert if I am admitted to the group _____
(student signature)

Scales	Key	M m	Slurring	Pitch	Octaves	1 2 3 4 5 (1 is low – 5 is high)
1	A B C D E F G	M m	1 2 3 4 6 8	1 2 3 4 5	2 3	1 2 3 4 5
2	A B C D E F G	M m	1 2 3 4 6 8	1 2 3 4 5	2 3	1 2 3 4 5

Solo	1 2 3 4 5
Intonation	1 2 3 4 5 _____
Rhythm	1 2 3 4 5 _____
Style	1 2 3 4 5 _____
Tone Quality	1 2 3 4 5 _____

Technique	1 2 3 4 5
Total Score	1 2 3 4 5
	Y N