



Cleveland Youth Wind Symphony 2017 - 2018 Audition Form

PLEASE PRINT NEATLY

Date _____

Audition Location _____

Name _____

Instrument _____ Grade(Fall-2017) _____

School (Fall 2017) _____

Years of CYWS II Participation (Circle One)

0 1 2 3 4

Returning Members indicate this year's Group (Circle One)

SW (Lichtler) CW (Allen)

Alternate (Circle One)

0 1 2 3 4

FIRST TIME AUDITIONING

_____ (Please Check)

Home Address House # and Street _____

City _____ State _____ Zip _____

Parent Cell# with Area Code (_____) - _____

Parent email _____

Student Cell# with Area Code (_____) - _____

Student email _____

Private Teacher's Name _____

Band Director(s) (Fall 2017) _____

REPERTOIRE _____

TONE _____

RHYTHM _____

INTONATION _____

TECHNIQUE _____

ARTICULATION _____

MUSICALITY _____

NOTES _____

_____ Recommended _____ CYWS I _____ CYWS II _____ Alternate _____