

High Park Choirs of Toronto Audition Form

Parents/Applicants: please fill out **top portion** of this form

Please attach
photo here

Child's Name: _____

Age (as of today's date): _____ Birthdate: _____
DD/MM/YY

Phone No(s): _____

Address: _____

City: _____ Postal Code: _____

Email: _____

Parent's Name(s): _____

Grade (as of today's date): _____ School: _____

Please list your musical experience:


School/Choir/Private Study

How Long?

How did you hear about the choir? _____

Conductor's Notes:

"O! Canada" (comments) _____

Range: 

Tone: 1 2 3 4 5 (5 being Best)

Pitch: Excellent Good Fair Poor

Tonal Memory: Ex.1 _____ Ex.2 _____ Ex.3 _____

Ability to adjust: Excellent Good Fair Poor

Additional Comments: _____
