



# PROSPECTIVE CHORISTER INFORMATION

2019 - 2020 Season

DATE: \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_ SEX: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

PARENTS' NAMES: \_\_\_\_\_

DAY PHONE \_\_\_\_\_ EVENING PHONE \_\_\_\_\_ CELL \_\_\_\_\_

EMAIL: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ GRADE (Fall 2019): \_\_\_\_\_

CURRENT OR PAST INSTRUMENT, VOICE OR DANCE EXPERIENCE (not required):  
\_\_\_\_\_  
\_\_\_\_\_

ARE YOU CURRENTLY PLAYING IN A BAND/ORCHESTRA OR SINGING IN ANOTHER CHORUS?

Name of group: \_\_\_\_\_ Director: \_\_\_\_\_

How did you find out about the Houston Children's Chorus?  
\_\_\_\_\_  
\_\_\_\_\_

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Please send completed information to:

**Houston Children's Chorus**  
**P.O. BOX 66567**  
**Houston, TX 77266-6567**  
**Phone: (713) 650.3800 Fax: (713) 650.3390**  
**Email: [info@houstonchildren.org](mailto:info@houstonchildren.org)**

*This form and a \$50.00 registration fee are due in the HCC office before we can schedule an audition appointment. If you wish to charge your registration fee, please provide us with the following information.*

CC # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Security Code \_\_\_\_\_ Confirmation # \_\_\_\_\_

Name on Card \_\_\_\_\_ Date entered \_\_\_\_\_

*Scholarships are available upon request and are based on financial need.*

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**For Office Use Only :**

Contacted: \_\_\_\_\_ Audition Date: \_\_\_\_\_ Time: \_\_\_\_\_

Registration Fee Paid: \_\_\_\_\_ Date: \_\_\_\_\_