

renoyouthjazzorchestra@gmail.com www.renoyouthjazzorchestra.com

Audition Application: Complete all sections

NAME:			
Address:			
City:	State:	Zip:	
Grade: Name of Sch	ool currently a	attending:	
•	ently playing ir le one) YES	n Band, Jazz Band, Or NO	chestra, or
Student Cell	Phone: ()		
Student Hom	ne Phone ()		
Student ema	il:		
	e – Alto, Teno	Years Played: or, or Bari)	
•		itional instruments play o, bass clarinet)	

School Band/Orchestra/Choral Director Name:
Phone Number
Private teacher: Time studied with this
eacher
Parent/Guardian
Mother's Name:
Cell Phone
Home Phone:
Email:
ather's Name:
Cell Phone
Home Phone:
Email:
Applicant's Signature
Parent's Signature
RYJO Shirt - (in adult size) circle one: XS, SM, MED, LG, XL,
XXL
Do you want to be considered for a small group COMBO Ensemble – (Circle one) YES NO