



Application for Old York Road Symphony 2017-2018 Young Artist Competition

First Name _____ Last Name _____

Age _____ Date of Birth _____

Instrument _____ How long have you been playing? _____

School _____ Grade _____

Home address _____ Phone number _____

City _____ State _____ Zip code _____

E-mail address _____ Social security number _____

Private teacher's name _____ Phone number _____

Please list any previous performance experience _____

Audition piece information

(include title, movement, composer, opus number and key)

Are you requesting a specific audition time? _____ 1st choice _____ 2nd choice _____

Accompanist's name _____ Phone number _____

Student signature _____ Date _____

Parent/ Guardian signature _____ Date _____

PLEASE SEND \$30.00 APPLICATION FEE, PAYABLE TO OYRS, WITH
COMPLETED APPLICATION FORM TO:

Old York Road Symphony, P.O. Box 133, Wyncote, PA 19095

AUDITIONS WILL BE ON SATURDAY, JUNE 3, 2017
APPLICATIONS MUST BE RECEIVED NO LATER THAN MAY 24, 2017