

**PUYALLUP VALLEY COMMUNITY BAND
2018 STUDENT SOLOIST APPLICATION FORM**

Today's Date _____

Name _____

Address _____

City _____ Zip _____

Telephone () _____ Email _____

Date of Birth ____/____/____

Instrument _____ Number of years you have been playing _____

High School of Applicant _____

Current Grade [circle one] **Junior** **Senior**

Private Teacher's Name _____

Teacher's phone () _____ Teacher's email _____

Solo work selected to perform (list title, movement, and composer, publisher)*

***Please bring three copies for the adjudicators to the audition.**

Signature of Applicant _____

Signature Parent/Guardian _____