

MUSICIAN INFORMATION

MUSICIAN NAME _____

EMERGENCY CONTACTS (Name and Phone Number) _____

ADDRESS _____

HOME PHONE NUMBER _____

ADDITIONAL PHONE NUMBERS (Name and Phone Number) _____

MUSICIAN E-MAIL _____

PARENT OR FAMILY E-MAIL _____

ADDITIONAL E-MAIL _____

MUSICIAN AGE _____

PRIMARY INSTRUMENT YOU PLAY _____ HOW MANY YEARS _____

LIST ALL OTHER INSTRUMENTS YOU PLAY AND FOR HOW MANY YEARS _____

DO YOU OWN YOUR PRIMARY INSTRUMENT _____

IF NOT, IS IT RENTED, BORROWED FROM SCHOOL, OR OTHER _____

DO YOU HAVE A PRIVATE MUSIC INSTRUCTOR _____

IF YES, NAME OF INSTRUCTOR _____

DO YOU HAVE A PIANO OR KEYBOARD AT HOME _____

DO YOU HAVE A COMPUTER AT HOME _____

SCHOOL YOU ATTEND _____

SCHOOL DISTRICT _____

PLEASE LIST FAMILY MEMBERS WILLING TO VOLUNTEER AT REHEARSALS,
CONCERTS, OR OTHER EAST COUNTY YOUTH SYMPHONY EVENTS (include e-mail)

ADDITIONAL INFORMATION YOU WOULD LIKE TO PROVIDE