

Flower Mound Community Orchestras

Audition Candidate Information

Candidates: please bring a completed copy of this form to your audition.

Name

Date

Address

Email

Candidate Phone

Birthday

Instrumental Experience

Instrument(s)

Ensemble Desired *(circle as many as apply to you)*

Preparatory Philharmonic Symphony

If you take private lessons, who is your teacher?

For how long have you taken lessons?

Ensemble Experience

Awards and Honors

How did you hear about FMCO?

Parent Name *(leave blank if over 18)*

Parent Phone *(leave blank if over 18)*

Parent Email *(leave blank if over 18)*

Is there anything else you'd like to tell us?
