



2017 European Concert Tour Application Form

Please print clearly and legibly (all information will be kept confidential within CYSO)

Name _____ Instrument(s) _____

Address _____ City _____ Zip _____

Primary Phone _____ 2nd Phone (if any) _____

Student's email (PLEASE PRINT **LEGIBLY**) _____

Parent/Guardian Name _____ Email _____

Parent/Guardian Name _____ Email _____

Your School _____ Birth date ____/____/____ Female Male

Grade during 2016-17 _____ School Music Director _____

Current or Most Recent Private Music Teacher _____

Music Teacher's Phone and/or email _____

With which CYSO orchestras you have played and what is the date of the last season you played?

- Preparatory Strings Last Season Played _____
- Sinfonette Last Season Played _____
- Premiere Orchestra Last Season Played _____
- Junior Symphony Last Season Played _____
- Youth Symphony Last Season Played _____

List any other musical groups in which you are currently or recently involved and the name of the conductor/director.

List all concert trips, including the approximate date, in which you have participated.

Why do you want to be a part of the 2017 CYSO Touring Orchestra?

Do you have a current passport? Yes No If Yes, what is the expiration date? _____

Please return this completed form to:

Dennis Burkhardt
 CYSO Tour Coordinator
 11115 236TH PL SW
 Woodway, WA 98020
 burkhardtd@comcast.net