□ref 1	□ref 2	□passport	□ Interview



2020 European Concert Tour Application Form Please print <u>clearly</u> and legibly (all information will be kept confidential within CYSO)

Name	Instrument(s)	
	City	
Primary Phone		
Student's email (PLEASE PRINT <u>C</u>	learly)	
Parent/Guardian Name	Email	I
Parent/Guardian Name	Emai	il
Your School	Birth date	<i>J</i>
Grade during 2019-2020	School Music Director	
Current or Most Recent Private N	Music Teacher	
Music Teacher's Phone and/or er	mail	
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 v	which you are currently or recently in	volved and the name of the conductor/director
List all concert trips, including the	e approximate date, in which you hav	ve participated.
Why do you want to be a part of	the 2020 CYSO Touring Orchestra?	
Do you have a current U.S. passp	ort? ☐ Yes ☐ No If Yes, what is t	the expiration date?
Please return this completed forr		
	CYSO Tour Coordinate	or
	11115 236 [™] PL SW Woodway, WA 98020	0

burkhardtd@comcast.net