



Application

Name: _____

Birthday: _____ Age: _____

Address: _____

Phone Number: _____

Allergies: _____

Special Needs: _____

Guardians / Parents: _____ contact # _____

_____ contact # _____

** Guardian / Parent Signature _____

Guardian / Parent E-mail address: _____

Does your child have permission to walk home from choir practice? YES / NO

As a Parent / Guardian, would you be interested in representing the Fireweed Children's Chorus on the Yellowknife Choral Society Board? _____
(meetings are once per month)

Please answer the following questions to help us get to know you better! (To be filled out with child)

Have you sung in a choir before? ___ yes ___ no

If so, what choir? _____ For how long? _____

What school do you attend? _____

Do you participate in your school choir? ___ yes ___ no

If not, why? _____

Do you know how to read music? ___ yes ___ no

Do you play any instruments? _____

Are you currently taking private music lessons? _____



Who is your favourite singer or group to listen to? _____

Why would you like to sing in the Fireweed Children's Chorus?

Do you know anyone else who is planning to join FCC?

What is one thing you would like me to know about you?

How did you hear about the Fireweed Children's Chorus?

What other activities are you involved in?

If you were in Fireweed last year, what is one thing you would really like to do again this year?

If you were in Fireweed last year, think of one thing that would make Fireweed even better?

FOR OFFICE USE ONLY

Registration Fee - \$50 ___ Paid ___ cheque ___ cash

Section Soprano 1 ___ Soprano 2 ___ Alto ___ Swing ___

Assigned # _____ (for purposes of assigned music)

Photo Permission Completed ___ yes ___ no