



FIRST EXPERIENCES IN SINGING  
**Application Form**  
Fall 2017 - Level I

**APPLICATION DEADLINE: Level I - September 6, 2017**

Date \_\_\_\_\_

Name \_\_\_\_\_ Boy or Girl \_\_\_\_\_  
*First Last*

Parent/Guardian Name(s) \_\_\_\_\_  
*Mr./Ms. First Last*  
\_\_\_\_\_ *Mr./Ms. First Last*

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

Cell Phone 1 (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work Phone 1 (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (for \_\_\_\_\_)

Cell Phone 2 (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work Phone 2 (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (for \_\_\_\_\_)

Child's Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade (Fall 2016) \_\_\_\_\_

School \_\_\_\_\_

Is your child currently studying an instrument? **YES / NO**

Instrument \_\_\_\_\_ # of years \_\_\_\_\_ Teacher \_\_\_\_\_

Has your child received any experience in classroom music instruction? **YES / NO**

Where? \_\_\_\_\_ # of years \_\_\_\_\_ Teacher \_\_\_\_\_

Are you currently playing in a band / orchestra or singing in another chorus? **YES / NO**

Where? *Pasadena Music Conservatory, Colburn School, Music Together, Other* \_\_\_\_\_

# of years \_\_\_\_\_ Teacher/Director: \_\_\_\_\_

How did you find out about LACC? \_\_\_\_\_



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- I am submitting this application by September 6, 2017, and I will pay:
- \$300 NON-REFUNDABLE fee for FES Level I

Check addressed to "Los Angeles Children's Chorus" (enclosed)

Credit card: AMEX , MC , VISA, or DSCVR card

o \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Name on credit card: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ / \_\_\_\_\_

3-digit code on back / 4-digit code in front for AMEX: \_\_\_\_\_

\_\_\_\_\_  
*Cardholder Signature*

**Please send check and form to:**

Los Angeles Children's Chorus  
585 East Colorado Boulevard  
Pasadena, CA 91101

Phone: (626) 793-4231

Fax: (626) 793-0173

Email: [info@lachildrenschorus.org](mailto:info@lachildrenschorus.org)