



## 2023-24 CONCERT SEASON Assessment Form

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE(s):    Primary    \_\_\_\_\_    Texts: Y    N

                  Secondary    \_\_\_\_\_    Texts: Y    N

Full-Time Resident?    Part-Time?    Months in FL: \_\_\_\_\_

Student? Y    N    Age 14 or over? Y    N

VOICE PART:    Soprano 1    2    Alto 1    2    Tenor 1    2    Bass 1    2

Which concert series will you be participating in?

#1 Dec 10 – Voices of Winter: A Global Holiday Celebration

#2 Feb 25 – Deep Blue: A Musical Voyage Across the Seas

#3 Apr 28 – Bach to the Beatles: A Journey Through Time & Melody

Years of singing experience with:

\_\_\_\_\_ Community/Professional/Collegiate Chorus    \_\_\_\_\_ The Venice Chorale

Check all that interest you:

Advanced Chamber Choir

Performing in Outreach Events

Solo Opportunities

Becoming an Assistant Conductor

Other instruments or talents that you would like to share: \_\_\_\_\_

Preferred DATE of assessment:

Sept. 18    8:45pm    Sept. 25    8:00pm    8:45pm

We will also schedule October and November assessments on Monday evenings at 6:30pm prior to the start of rehearsal at 7pm. Please indicate the date you prefer: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Please return this form via email to [info@thevenicechorale.org](mailto:info@thevenicechorale.org)