## **GBCCA** Youth Chinese Music Ensemble Audition Application Form

Name (English):	Name (Chinese):		
Date of Birth: //	Grad	e of School:	
Father:(English Name)	(Chinese Name)		
Mother:(English Name)	(Chinese Name)		
Address:Street			
Town	State	Zip	
Phone: ()		<u>—</u>	
Parent e-mail:			
Participator e-Mail:			
Instrument(s) played:			
Please read the following statem agree.	ent carefully	and sign at the bottom if	you
The objectives of the GBCCA You 1. to provide opportunities 2. to perform on behalf of of Chinese culture.	s for youth to	play together and	,
In order to achieve these objective	•		
forth by the GYCME committee and the director regarding practi	_		actor
Applicant Signature:		Date:	