

Davis Senior High School  
Symphonic and Jazz Band Audition Application

Please complete the application and submit with your recording or at the beginning of your live audition.

Student Name: \_\_\_\_\_

Auditioning Instrument: \_\_\_\_\_

Student ID #: \_\_\_\_\_

Student Grade (As of 2018/19 academic year): \_\_\_\_\_

Current School: \_\_\_\_\_

School you will be attending in 2018/19 (Check only one box)

DHS   
DaVinci

Ensemble(s) you are auditioning for (Circle each as applicable)

Symphonic Band      Jazz Band

Student Home Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone #: \_\_\_\_\_

Student Email Address: \_\_\_\_\_

Parent Email Address: \_\_\_\_\_

Student Cell Phone #: \_\_\_\_\_

Parent Cell Phone #: \_\_\_\_\_

Parent Names: \_\_\_\_\_

What other musical instruments do you play proficiently?

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Do you grant permission for Mr. Slabaugh to share contact information from this form with the DHS Band Boosters? (Circle one)      YES      NO

Do you play in other musical ensembles? If so, please name them on the back of this application.