***Contact Information***

Name: \_\_\_\_\_\_ Age: \_\_\_

E-mail: \_\_\_\_\_\_ School or university: \_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_

***Useful Information for Choir Planning***

Why do you want to join this choir? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have experience dealing with seniors? Yes\_\_ No\_\_

 If yes, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Allergic or sensitive to wheat Yes\_\_ No\_\_

 If so, are you celiac? Yes\_\_ No\_\_

Have sung in a choir before Yes\_\_ No\_\_

 If yes, how many years? \_\_\_\_\_

If known, do you sing soprano,

alto, tenor or bass? \_\_\_\_\_\_

Can read music Yes\_\_ No\_\_

Would like a words-only copy

rather than music Yes\_\_ No\_\_ (See over)

Do you have any disabilities that we should know about?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is there other information that you would like us to know? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Health permitting, do you agree to attend the dementia information session at 3:00 on March 11 and the weekly practices from 3:00 to 4:30 from March 25 to May 27 and the concert in late May? Yes\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

Signature of Student Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian (for students Date

under 18)

Please e-mail the completed form to joyfulsottawa@gmail.com .