


paradise symphony orchestra
Musician Application

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Home Phone: _____ Cell Phone: _____

Instrument: _____

Describe your musical background:

Training: _____

Private Teachers, if any: _____

Performances: (Please list your experience with orchestras, ensembles or other groups and the number of years you performed with them.)

Would you be able to attend regular orchestra rehearsals Monday from 7:00 to 9:15 pm? _____

Print this form, fill it out, scan it and email it to: paradisesymphony1958@gmail.com
Someone from the Paradise Symphony will contact you shortly.