

OWENSBORO SYMPHONY YOUTH ORCHESTRAS
2007-2008 MUSICIAN INFORMATION FORM

PLEASE COMPLETE ALL INFORMATION BELOW. Please type or print legibly.

Ensemble: (please circle one) **OSYO** **OSYO-CADET**

Name: _____ Instrument _____

Address: _____

City/State/Zip: _____

Phone: (home) _____ (cell) _____

E-mail Address: _____

Name of School (2006-2007): _____

Age: _____ Grade: _____ Year of high school graduation: _____

School Music Teacher: _____ Ensemble: _____

Private Music Teacher: _____ Phone: _____

Years Playing Instrument: _____

Other Instruments Played: _____ How long? _____

List school and other music organizations that you will be involved with this coming year. Include director's/sponsor's name. This information will help us inform area organizations of our activities and avoid schedule conflicts.

If outside the Owensboro area, please list your local newspaper:

