

**BAKERSFIELD YOUTH SYMPHONY ORCHESTRA**  
**Audition Requirements and Application**  
**2017-2018 Season**

For consideration as a member of the BYSO, you must fulfill the following:

1. Completion of this application accompanied by \$25 non-refundable application fee mailed to:  
BYSO  
1328 34<sup>th</sup> Street, Suite A  
Bakersfield, CA 93301                      **no later than Friday, August 25, 2017.**
2. Payment of the \$25 application fee will apply to the tuition fee of \$250, payable upon admission to the Youth Symphony. If you are not accepted, your \$25 will NOT be refunded, and if you do not appear, the fee will be forfeited. Complete payment of tuition must be received by the first rehearsal. Financial aid to cover tuition is available based on need. Applications for financial aid are available on our web site: [bysorocks.org](http://bysorocks.org)
3. Performance of audition music including:
  - a. The assigned scale(s) and excerpts for your instrument provided on the BYSO on website.
  - b. Be prepared to sight read music
4. Membership is open to students in the 7<sup>th</sup> grade through college undergraduate (through age 22 at the time of auditions).
5. You must be enrolled and in good standing in your school instrumental group where available.
6. Attendance at all rehearsals and concerts is mandatory if you become a member of the BYSO. Please check our web site at [bysorocks.org](http://bysorocks.org) for the 2017-2018 schedule.

Auditions will be held on Saturday, September 9, 2017 at Thompson Junior High School, 4200 Planz Road. The audition schedule/times will be posted on our website no later than September 3<sup>rd</sup>. If you have questions or concerns, contact Regina Pryor at 332-9582 or e-mail at [reginapryor78@gmail.com](mailto:reginapryor78@gmail.com)

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**Please print and submit the following information:**

Name \_\_\_\_\_ Instrument \_\_\_\_\_

Address (including zip) \_\_\_\_\_

Home phone \_\_\_\_\_ cell \_\_\_\_\_ Age \_\_\_\_\_ School grade \_\_\_\_\_

Student e-mail \_\_\_\_\_ Parent e-mail \_\_\_\_\_

Parent/guardian name(s) \_\_\_\_\_

Parent Signature(s) \_\_\_\_\_

How long have you been playing your instrument \_\_\_\_\_

Private teacher name and phone number \_\_\_\_\_

How long have you been studying privately \_\_\_\_\_

School you will be attending in Aug/Sept. \_\_\_\_\_ Music director \_\_\_\_\_

Previous musical experience and/or other instruments you play. \_\_\_\_\_

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----For office use only----

Check received \_\_\_\_\_ (\$25 charge for all returned checks)                      Cash received \_\_\_\_\_