

Please email your completed form & video/performance file to ymgc@mblbc.org by 21 August, 2017

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CANDIDATE'S DETAILS: Below 28 years old

Supported by:



UCSI University

Candidate's Name:	IC/Passport No.:
Date of Birth (DD/MM/YY):	Age:
Candidate's Email:	Male <input type="checkbox"/> Female <input type="checkbox"/>
Candidate's occupation: (State the name of your school if you are still studying or working in an institution)	Tel (Mobile):
Address:	Tel (Home):
City:	Postcode:
Emergency Contact:	
Name of Parents/ Others:	Occupation:
Email:	Tel No.:
Preferred time for audition: <input type="checkbox"/> AM <input type="checkbox"/> PM	



TYPE OF INSTRUMENT(S): Please tick the box for your selection(s)

ORCHESTRA				CHOIR
STRINGS	WOODWIND	BRASS	TIMPANI & PERCUSSION	CHOIR
<input type="checkbox"/> Violin <input type="checkbox"/> Viola <input type="checkbox"/> Cello <input type="checkbox"/> Double Basses	<input type="checkbox"/> Flutes <input type="checkbox"/> Oboes <input type="checkbox"/> Clarinets <input type="checkbox"/> Bassoons	<input type="checkbox"/> Trumpets <input type="checkbox"/> Trombones <input type="checkbox"/> Tuba <input type="checkbox"/> French Horn	<input type="checkbox"/> Timpani <input type="checkbox"/> Percussion <input type="checkbox"/> Piano <input type="checkbox"/> Harp	<input type="checkbox"/> Soprano <input type="checkbox"/> Alto <input type="checkbox"/> Tenor <input type="checkbox"/> Bass



TERMS & CONDITIONS:

- All auditions are free of charge.
- Candidates are required to prepare 2 contrasting works.
- If selected, candidates must then fill in the 'YMG Project Form' and adhere to the Terms & Conditions as specified.
- Candidates will be notified of the results within a month of the audition.
- The panel's decision is final.



FOR APPLICANT

I, the undersigned candidate / parent / guardian (cross out as applicable), have read and understood the Terms & Conditions and agree to be bound by them.

SIGNATURE:

DATE:

FOR OFFICE USE ONLY

SELECTED KIV FAILED

Remark: _____

For and on behalf of:- **MBLBC**

Authorised Signature:

Name:

Position: