|  |  |
| --- | --- |
|  | Bunk Johnson Creative Arts Academy Inc.  Address: P.O. Box ----------------  New Iberia, La 70560  Phone: (337) \_\_\_-\_\_\_\_  Email: bunkbrazz@gmail.com |

# Student Audition Application

## Applicant Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: |  |
|  | Last | First | M.I. |  |  |

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | State | ZIP Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Email |  |

|  |  |
| --- | --- |
| Instrument: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Do you have a passion to play music? | YES | NO | Do you have your own instrument.? | YES | NO |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you play in a school band or take private lesson? | YES | NO | If yes, school or instructor? |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Do you have a favorite type of music? | YES | NO |  |

|  |  |
| --- | --- |
| If yes, explain: |  |

## Parent/Guardian information

Please list Parent/Guardian contact information.

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: |  | Relationship: |  |
| Address: |  | Phone: |  |
| Email: |  |  |  |
|  |  |  |  |

## Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information may result in not being selected for membership.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |
| Parent Signature: |  | Date: |  |