



Application Form

Name: _____ D.O.B _____ Age _____

School attending: _____ Grade: _____

Applicants mobile (if applicable): _____

Address: _____

Parent/Guardian Contact: _____

Email: _____ Mob: _____

Previous singing experiences (list most recent 3yrs): _____

Do you play another instrument (s)? _____

Have you completed practical or theory exams out of school? _____

Highest Grade achieved? _____

Would you be available for parental assistance of GLYS? (eg supervision at performances etc) _____

Why do you want to be part of GLYS? _____

I give permission for photos/videos of my son/daughter _____ to appear on the GLYS website and Facebook page. Signed _____