

Metropolitan Area Youth Jazz Orchestra (MAYJO)
Application Form

Name_____

Instrument(s)_____

School_____ Year in School (2020-2021)_____

Address_____

Phone_____ Student E-mail_____

Parents' Names_____

Parents' E-mail_____ Parents' phone_____

Please list your previous musical experience (ensembles performed in, solos performed, honor bands, etc.):

Band Director Name (print)_____

Band Director Signature_____

Band Director Phone_____ Band Director E-mail_____

Band Director Comments:

I understand that as a member of MAYJO I will be expected to pay a \$100 fee per semester and attend all rehearsals and performances except in the case of illness, family emergencies, or a conflict with a school-related music activity. I also understand that I must have and maintain a high school grade point average of at least 2.0 on a 4.0 scale and participate in my high school jazz ensemble (if available).

Student signature_____ Date_____

Parent signature_____ Date_____

'Please bring this application with you to your audition.'