

Music at Zion Response Form _____

I am interested in the following. (Please indicate your interests below.)

Choral/Vocal Ensembles

- Chancel Choir: I sing: Soprano, Alto, Tenor, Bass, Don't know
- Joyful Noise Children's Choir. Child's age _____, Child's Grade Level _____
- Solo or Small Ensembles: I sing: Soprano, Alto, Tenor, Bass

Instrumental Ensembles

- The Adult Handbells: I have bell experience, Never touched 'em before
- The Zion Brass: *(Please check the instrument(s) that you play below.)*
- The Praise Band Vocals: I sing: Soprano, Alto, Tenor, Bass
- The Praise Band Instruments: *(Please check the instrument(s) that you play below.)*
- Instrumental Solos and Small Ensembles *(Please check the instrument(s) that you play below.)*

I play the following Instrument(s). Please check all that apply.

- | | | | | | |
|---|---|--|--|---|----------------------------------|
| <input type="checkbox"/> Violin | <input type="checkbox"/> Viola | <input type="checkbox"/> Cello | <input type="checkbox"/> Bass | | |
| <input type="checkbox"/> Flute | <input type="checkbox"/> Piccolo | <input type="checkbox"/> Clarinet | <input type="checkbox"/> Alto/Bass Clarinet | <input type="checkbox"/> Oboe | <input type="checkbox"/> Bassoon |
| <input type="checkbox"/> English Horn | <input type="checkbox"/> Alto Saxophone | <input type="checkbox"/> Tenor Saxophone | <input type="checkbox"/> Baritone Saxophone | | |
| <input type="checkbox"/> Trumpet/Coronet | <input type="checkbox"/> French Horn | <input type="checkbox"/> Baritone Horn | <input type="checkbox"/> Trombone | <input type="checkbox"/> Euphonium/Tuba | |
| <input type="checkbox"/> Harp | <input type="checkbox"/> Piano/Keyboard | <input type="checkbox"/> Organ | <input type="checkbox"/> Recorder <i>(Circle one: S A T B)</i> | | |
| <input type="checkbox"/> Percussion (Snare, Trap Set, etc.) | <input type="checkbox"/> Melody percussion (xylophone, glock, etc.) | <input type="checkbox"/> Timpani | | | |
| <input type="checkbox"/> Classical/Acoustic Guitar | <input type="checkbox"/> Electric Guitar | <input type="checkbox"/> Bass Guitar | | | |

Name _____ Phone (_____) _____

Street Address

City/State/Zip

E-Mail Address

Please fill out and return to Rob Meyer or the Church Office.