

**American Choral Directors Association of Minnesota (ACDA-MN)
2014-15 STATE HONOR CHOIRS**

STUDENT INFORMATION FORM

*Note to parents: Your child's choral director has encouraged him/her to audition for the state honor choir program.
For more details and answers to your questions, go to the ACDA-MN state website at: www.acda-mn.org
If interested, please complete form and return with \$15 paid audition fee to director*

Student Name (first) John (last) DesLauriers
(parents please print very clearly)

Grade in School (please circle) 4 5 6 7 8 9 10 Gender: M F

Address 17233 Clear Spring Lane City Minnetonka State MN Zip 55345

Student Email Address johndeslauriers2001@gmail.com

Name of Parent/Guardian Gia DesLauriers

Parent Phone (952-836-4430) Parent Email address gia_deslauriers@hotmail.com

T-Shirt Size (please circle) Youth Size: M: 10-12 L: 14-16 Adult Size: **S** **M** **L** **XL** **XXL** **XXXL**

Height in inches ONLY: 60 inches

Student Commitment: If selected, I will be responsible to learn and memorize the music prior to Honor Choir day, and will proudly represent my institution to the best of my ability by exhibiting outstanding character, commitment, and musicianship.

Student Signature

Date

Parent Commitment: If accepted, the cost to participate in the Honor Choir event is **\$115**. In addition, I am responsible for clearing the family calendar of any and all potential conflicts, and to provide travel arrangements. I understand these obligations and will support my child in accepting this statewide honor if he/she is chosen to participate in the 2014-15 ACDA-MN State Honor Choir program.

Gia DesLauriers

Parent/Guardian Signature

October 7, 2014

Date

Audition Fee: Enclosed is the **\$15** audition fee:

_____ cash

_____ check payable to your child's institution

(Please return this form and the \$15 audition fee to your director by the due date)