

THE HOUSTON CHORAL SOCIETY MEMBERSHIP APPLICATION

Name		Date				
Cell Phone:		E-mail:				
Full Addres	s:					
				State	Zip	
			ecent Choral Group			
How did yo	u hear about HCS?		Have you heard	HCS perform? Yes	No	
* Are you in	nterested in being consider	ered for membership in the	e HCS Chamber Choir?			
* Are you in	nterested in joining HCS	for our performance at Ca	arnegie Hall on June 17, 20	018?		
Please share	e some of your vocal/sing	ing experience/training _				
		*******	*****			
Please revie	w the document HCS M	embership Policies and	General Information, and	d <u>initial</u> each statem	ent below to	
acknowledg	ge that you have read and	understood the requirement	ents for members:			
*	I hereby commit to be available for all rehearsals and performances. I understand that rehearsals are held on Monday evenings starting at 7:30 p.m., and 7:00 p.m. on Monday and Thursday nights of each Concert Week. (A full Rehearsal Calendar will be provided for each semester.) I will observe all appropriate aspects of good rehearsal etiquette.					
*	I understand the importance of contacting my Section Leader if I need to miss a rehearsal. If I miss more than a combined total of three rehearsals, I know that I will be required to sing for my Section Director to display competency in the music selected for the current concert.					
*	I understand that Regist	ration Fees are \$50.00 pe	r semester.			
*	I know that I am respon	sible for obtaining the sta	ndard concert attire:			
	I am a female, and know that I must purchase the standard black skirt and camisole/jacket at a cost of approximately \$100.00, the standard concert jewelry at a cost of approximately \$20.					
	I am a male, and for use in each performa		se or rent a black tuxedo a	and black bow tie/cu	mmberbund	
*	I am aware that there is the possibility of financial assistance if I am not able to pay the full amount for Semester Fees or Concert Attire. If I need such assistance, I will complete the Application for Financial Assistance .					
*	#2 pencil. I understand	I agree to take good care of the musical scores which are issued to me. I will mark the Director's notes in #2 pencil. I understand that I may be able to purchase the scores, and will contact the Music Librarian ediscuss that option. If I do not purchase my scores, I will return them in good condition after the performance.				
*			raphs, internet images or cactivities in which I particip		n may result	
Signature:					12/13/17	