

Cambridge Kiwanis Boys Choir and Young Men's Chorus

Application Form

Please e-mail to: ckbc.j.kropf@sympatico.ca

or post it to:

The Cambridge Kiwanis Boys Choir

36-10 Isherwood Ave.

Cambridge, ON N1R 8L5

Boy's Name: _____
(Surname) (First) (Middle)

Address: _____

City: _____ Postal Code: _____

Phone Number: _____

E-Mail Address (if applicable): _____

Date of Birth: _____
(Month) (Day) (Year)

Ontario Health Number: _____ Letters: _____

Present School: _____ Present Grade: _____

Father's Name: _____

Mother's Name: _____

Health Information: (Please list any allergies, health concerns, etc.)

Musical Experience: (Please list any choir, instrument lessons, etc.) _____

Reference: (Please give one reference, i.e. music teacher, teacher, pastor, coach, cub or scout leader, etc.)

Name: _____

Position Held: _____ Phone Number: _____