

Fox Valley Orchestra Youth Internship Application

Student's Name _____

Birthdate (MM/DD/YY) _____ Age _____ Grade _____

Name of School _____

Parents' Names: _____

Street Address _____

City/State/Zip _____

Phone: Home (____) _____

Cell (____) _____

Email _____

Music or Private Teacher's Name: _____

Teacher's Phone (____) _____ Email _____

Please check the box below to indicate for which internship period you are available. Remember that all applicants **MUST** be available for **ALL** rehearsals and **ALL** concerts to be awarded the internship. Directions for rehearsal and concert venues will be posted on the website. On concert days, applicants must be available for both the dress rehearsal/sound check before the concert and full duration of the concert.

April Concert: Friday, April 27, 7pm and Sunday, April 29, 3pm at Crimi Auditorium at Aurora University
Required Rehearsals (held at the New England Congregational Church, Aurora, on Sundays) from 7-9:30pm: March 25, April 1, April 15, and April 22. There is no rehearsal on April 8.

June/July Concert: Saturday, June 30, 7pm at the Norris Cultural Arts Center (St. Charles) and Sunday, July 1, 3pm at Paramount Theater (Aurora).

Required Rehearsals (held at the New England Congregational Church, Aurora, on Sundays) from 7-9:30pm: June 3, June 10, June 17, and June 24.

Note: Internships are awarded solely on the basis of the applicant's demonstrated musical abilities, availability for internship, and enrollment in high school. No consideration is given to any other factor, including the applicant's gender, ethnicity, religion, disability, or economic circumstance.

I hereby confirm that I meet all eligibility requirements for the Fox Valley Orchestra Youth Internships as published in the received internship announcement letter and online at www.foxvalleyorchestra.org. I also confirm that I am available to participate in the rehearsal and concert schedule of the Fox Valley Orchestra for either or both internship periods as noted in my selections. I understand that if I am awarded an internship, but am unable to attend all dates as indicated, the internship may be cancelled and/or scholarship reward forfeited. Enclosed with this form is a nonrefundable \$15.00 application fee.

Applicant's Signature _____ Date _____

Parent or Guardian's Signature _____ Date _____

Teacher's Signature _____ Date _____