



Worship & *creative* Arts Ministry

Instrumental Application

Contact Information

Name _____ Date _____

Address _____

City _____ State _____ ZIP _____

Phone: Home _____ Cell _____ Work _____

E-mail _____ @ _____

Birthday(m/d/y) _____ Anniversary(m/d/y) _____ Spouse: _____

Children living at home (First name and ages): _____

Personal Information

Briefly describe yourself:

What are your hobbies/interests?:

When and how did you come to know Jesus as Savior?:

Music Information

Music Experience:

(List # of years)

High School _____

College _____

Church _____

Other (Please list): _____

Rate your ability to read music:

____ Excellent

____ Good

____ Fair

____ Poor

____ Not at all

Do you have any experience in playing solos or in an ensemble? ____ Yes ____ No

If yes, explain: _____

How long have you been attending Manassas Assembly of God? _____

Instrumental Assessment

(To be filled out by band director)

1 - Superior 2 - Excellent 3 - Good 4 - Fair 5 - Poor

Articulation 1 2 3 4 5 _____

Tone Quality 1 2 3 4 5 _____

Intonation 1 2 3 4 5 _____

Expression 1 2 3 4 5 _____

Sight Reading 1 2 3 4 5 _____

Range



Additional Comments: _____
