



WCMS Summer Piano Festival Audition Form 2025

Date _____ Student Name _____

Parent/Guardian Name _____

Address _____

Phone # _____ Email address _____

Current Grade _____ Age _____

T-shirt size: Adult? ___ Youth? ___ Circle one: XS S M L XL XXL

How did you hear about this program?

Length of piano study _____

Name of Private Teacher _____

If non-WCMS teacher, please indicate:

Teacher Phone # _____ Teacher email address _____

What method book(s) are you currently working on?

Title and composer of your audition piece:

Please list the repertoire you have learned in the past year:

Please list the scales that you have learned to play (including number of octaves):

Do you have prior ensemble experience? If yes, please describe: