



AUDITION FORM (2015)

Please fill out as much of the requested information below as possible, or the appropriate choice where applicable. Please return no later than June 15<sup>th</sup>, 2015 to [Trunk7musicfestival@gmail.com](mailto:Trunk7musicfestival@gmail.com)

Full Name: \_\_\_\_\_

Members Names( if applicable): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Group Name: (if applicable) \_\_\_\_\_

Age : \_\_\_\_\_

Preferred way of contact: (phone-text-email) \_\_\_\_\_

Social Media Info: Facebook URL \_\_\_\_\_

Twitter Name \_\_\_\_\_ Instagram Name \_\_\_\_\_

PERFORMANCE EXPERIENCE/AWARDS:

Description/Date: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

---

---

**BIOGRAPHY:** Please describe yourself or group. Please include why you/your group feel the Trunk & Music Festival is important to you and the reason you are interested in performing. \*Please attach Audio or youtube link to application.