



## ENROLMENT

RETURNING WARRIOR?

YES

NO

## PERSONAL INFORMATION

Date: \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Postal code \_\_\_\_\_ Phone # (w) \_\_\_\_\_ (h/cell) \_\_\_\_\_

What is your profession? \_\_\_\_\_ Age Group  29 or under  30 to 39  40 or over

How did you find out about Weekend Warriors? \_\_\_\_\_

Briefly describe your reason for enrolling in Weekend Warriors. \_\_\_\_\_

Are you joining with a friend or family member? Yes  No  If so, who? \_\_\_\_\_

Anything else your band should know about you? \_\_\_\_\_

## MUSICAL BACKGROUND

Instrument(s) you play \_\_\_\_\_ Lead vocals? Y  N  Back-up vocals? Y  N

Are you currently playing  At home?  With friends?  In a band?  In a church?  Other \_\_\_\_\_

Are you a  Retired pro?  Long-time amateur?  Hobbyist?  Beginner?  # of years/months playing \_\_\_\_\_

Briefly describe your level of proficiency. \_\_\_\_\_

When and where did you play your last gig? \_\_\_\_\_

What style of music would you feel most comfortable performing in the Weekend Warriors program?

### ROCK

### COUNTRY

### BLUES

### JAZZ

### OLDIES

### POP

- |                                  |  |  |   |   |  |
|----------------------------------|--|--|---|---|--|
| <input type="checkbox"/> Beatles | <input type="checkbox"/> Garth Brooks    | <input type="checkbox"/> B.B. King       | <input type="checkbox"/> Miles Davis    | <input type="checkbox"/> Beach Boys     | <input type="checkbox"/> Pearl Jam       |
| <input type="checkbox"/> Stones  | <input type="checkbox"/> Clint Black     | <input type="checkbox"/> John Lee Hooker | <input type="checkbox"/> Herbie Hancock | <input type="checkbox"/> Chuck Berry    | <input type="checkbox"/> Hootie          |
| <input type="checkbox"/> The Who | <input type="checkbox"/> Wynonna         | <input type="checkbox"/> Billy Holiday   | <input type="checkbox"/> Lena Horne     | <input type="checkbox"/> Little Richard | <input type="checkbox"/> Whitney Houston |
| <input type="checkbox"/> Cream   | <input type="checkbox"/> Trisha Yearwood | <input type="checkbox"/> Robert Cray     | <input type="checkbox"/> John Coltrane  | <input type="checkbox"/> Elvis Presley  | <input type="checkbox"/> The Police      |
| <input type="checkbox"/> _____   | <input type="checkbox"/> _____           | <input type="checkbox"/> _____           | <input type="checkbox"/> _____          | <input type="checkbox"/> _____          | <input type="checkbox"/> _____           |

## REHEARSAL TIMES

On each day of the week, please indicate all the time periods that you are available to practice. The more times that you indicate, the better we'll be able to place you with people of similar musical interests. Practice will be once a week.

### MONDAY

### TUESDAY

### WEDNESDAY

### THURSDAY

### FRIDAY

### SATURDAY

- |                                  |                                  |                                  |                                  |                                  |                                 |
|----------------------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|---------------------------------|
| <input type="checkbox"/> 6-8 pm  | <input type="checkbox"/> 6-8 pm  | <input type="checkbox"/> 6-8 pm  | <input type="checkbox"/> 6-8 pm  | <input type="checkbox"/> 6-8 pm  | <input type="checkbox"/> 2-4 pm |
| <input type="checkbox"/> 8-10 pm | <input type="checkbox"/> 8-10 pm | <input type="checkbox"/> 8-10 pm | <input type="checkbox"/> 8-10 pm | <input type="checkbox"/> 8-10 pm | <input type="checkbox"/> 4-6 pm |

### FOR STAFF USE ONLY

Round starting \_\_\_\_\_ Concert Date \_\_\_\_\_ Returning Y N S.L. 1 2 3  
Notes

Paid - Inv

Confirmation: Interested Y N date band Y N date rehearsal Y N date