



## OCC Singer Registration Form

**NEW SINGERS** – please complete this form and bring it to the first rehearsal.

**RETURNING SINGERS** – please complete this form if you didn't sing with us in the last 2 years **\*\*or\*\*** if there is information to be updated.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

\_\_\_\_\_

Telephone(s): \_\_\_\_\_

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

Emergency Contact Name: \_\_\_\_\_

&

Phone number: \_\_\_\_\_

**Circle** your chorale section:    Soprano 1    Alto 1    Tenor 1    Bass 1    Not Sure  
   Soprano 2    Alto 2    Tenor 2    Bass 2

Brief Musical Experience: \_\_\_\_\_  
(new singers only)

\_\_\_\_\_

I will follow the OCC Health Protocols.

Signature \_\_\_\_\_

**Thank you!**