

## Fischoff Chamber Music Mentoring Project Application

Please have each member fill out completely & return to the Fischoff office:  
Fischoff Chamber Music Association, 302 Brownson Hall, Notre Dame, IN 46556

Ensemble Name: \_\_\_\_\_ Playing together as a group since: \_\_\_\_\_

Instrumentation of group: \_\_\_\_\_

Group contact (name, phone & email): \_\_\_\_\_

Band/Orchestra Instructor (name, phone & email): \_\_\_\_\_

### Member 1:

Name: \_\_\_\_\_ Instrument: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Started playing instrument: \_\_\_\_\_

School: \_\_\_\_\_ Years in Chamber Group: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Home Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Private Instructor's Name: \_\_\_\_\_ # of years taking private lessons: \_\_\_\_\_

Instructor's email: \_\_\_\_\_ Phone: \_\_\_\_\_

List performance experience (ensembles, etc.): \_\_\_\_\_

\_\_\_\_\_

List any musical honors/awards: \_\_\_\_\_

Extracurricular activities: \_\_\_\_\_

### Member 2:

Name: \_\_\_\_\_ Instrument: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Started playing instrument: \_\_\_\_\_

School: \_\_\_\_\_ Years in Chamber Group: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Home Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Private Instructor's Name: \_\_\_\_\_ # of years taking private lessons: \_\_\_\_\_

Instructor's email: \_\_\_\_\_ Phone: \_\_\_\_\_

List performance experience (ensembles, etc.): \_\_\_\_\_

\_\_\_\_\_

List any musical honors/awards: \_\_\_\_\_

Extracurricular activities: \_\_\_\_\_

**Member 3:**

Name: \_\_\_\_\_ Instrument: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Started playing instrument: \_\_\_\_\_

School: \_\_\_\_\_ Years in Chamber Group: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Home Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Private Instructor's Name: \_\_\_\_\_ # of years taking private lessons: \_\_\_\_\_

Instructor's email: \_\_\_\_\_ Phone: \_\_\_\_\_

List performance experience (ensembles, etc.): \_\_\_\_\_

\_\_\_\_\_

List any musical honors/awards: \_\_\_\_\_

Extracurricular activities: \_\_\_\_\_

**Member 4:**

Name: \_\_\_\_\_ Instrument: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Started playing instrument: \_\_\_\_\_

School: \_\_\_\_\_ Years in Chamber Group: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Home Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Private Instructor's Name: \_\_\_\_\_ # of years taking private lessons: \_\_\_\_\_

Instructor's email: \_\_\_\_\_ Phone: \_\_\_\_\_

List performance experience (ensembles, etc.): \_\_\_\_\_

\_\_\_\_\_

List any musical honors/awards: \_\_\_\_\_

Extracurricular activities: \_\_\_\_\_

**Member 5:**

Name: \_\_\_\_\_ Instrument: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Started playing instrument: \_\_\_\_\_

School: \_\_\_\_\_ Years in Chamber Group: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Home Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Private Instructor's Name: \_\_\_\_\_ # of years taking private lessons: \_\_\_\_\_

Instructor's email: \_\_\_\_\_ Phone: \_\_\_\_\_

List performance experience (ensembles, etc.): \_\_\_\_\_

List any musical honors/awards: \_\_\_\_\_

Extracurricular activities: \_\_\_\_\_

**Member 6:**

Name: \_\_\_\_\_ Instrument: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Started playing instrument: \_\_\_\_\_

School: \_\_\_\_\_ Years in Chamber Group: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Home Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Private Instructor's Name: \_\_\_\_\_ # of years taking private lessons: \_\_\_\_\_

Instructor's email: \_\_\_\_\_ Phone: \_\_\_\_\_

List performance experience (ensembles, etc.): \_\_\_\_\_

List any musical honors/awards: \_\_\_\_\_

Extracurricular activities: \_\_\_\_\_

**For more information, contact Pam O'Rourke at (574) 631-2903 or [pam@fischhoff.org](mailto:pam@fischhoff.org)**

Office use only: Date application received:

Contract received:

Coach assignment: