

Name _____

City of Residence _____

Email Address _____

Phone _____

Parent/Guardian Name _____

Parent/Guardian Email _____

Parent/Guardian Phone _____

School Name _____ Grade (Fall 2024) _____

Do you read music? Yes No

If yes, how well? Well Somewhat well Not well

Have you had private training? Yes No

If yes, how long have you studied and with whom? _____

How did you hear about Palm Beach Opera Studio? _____

What interests and inspires you about opera as an art form?

What would you hope to learn or develop through participation in Palm Beach Opera Studio?

What has been your favorite musical experience so far, and why?

What are some of your interests outside of singing?

*As a reminder, all applicants must submit a **résumé** and **two video recordings** to jwilson@pbopera.org with this completed application form.*