



**Ad Hoc Musician Application Form 2024**

**Personal Information:**

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

Date of Birth: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

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

City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

**Instrument Information:**

Instrument(s) Played: \_\_\_\_\_

Number of Years Playing: \_\_\_\_\_

Level of Proficiency (Beginner/Intermediate/Advanced): \_\_\_\_\_

Previous Orchestra or Ensemble Experience (if any): \_\_\_\_\_

\_\_\_\_\_

**Availability:**

Availability for Rehearsals (Please specify days/times): \_\_\_\_\_

Availability for Performances (Please specify days/times): \_\_\_\_\_

Are you willing to travel for performances? (Yes/No) \_\_\_\_\_

**Additional Information:**

Do you have any special skills or talents that you believe would benefit the orchestra? (e.g., conducting, composition, arranging) \_\_\_\_\_

\_\_\_\_\_

Do you have any scheduling conflicts or commitments that may affect your participation in rehearsals or performances? (Yes/No, If yes, please specify) \_\_\_\_\_

\_\_\_\_\_

**References:**

Please provide the contact information for two references who can speak to your musical abilities and character:

Reference #1 Name: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

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

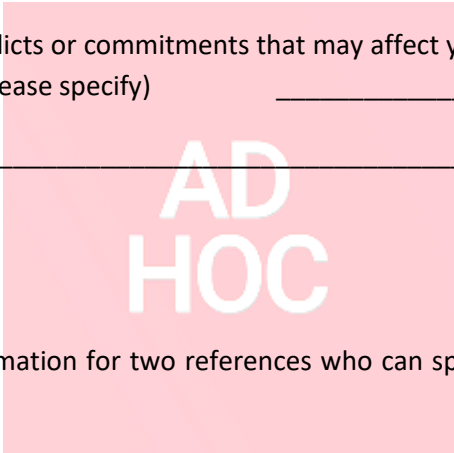
Phone Number: \_\_\_\_\_

Reference #2 Name: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_



**Declaration:**

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that any false or misleading information may result in the termination of my membership.

**Signature:** \_\_\_\_\_

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

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**AD  
HOC**