

**Grace Worship Ministries Vocal Team Interest Form**

Name \_\_\_\_\_  
E-mail \_\_\_\_\_  
Phone \_\_\_\_\_ cell phone \_\_\_\_\_  
Address \_\_\_\_\_

**Availability**

I am interested in participating: *choose one*  
**Once a month                      Twice a month                      As often as needed**

I generally have Thursday evenings free. **Yes   No   Not sure**

My spouse and family fully understand the time commitment and are supportive of my participation in this ministry. **Yes   No   Not sure**

What other outside activities are you your spouse or your children involved in that might pose a potential conflict?

I already know I will be gone on the following dates:  
\_\_\_\_\_

**Musical experience**

How well would you say you can read music? \_\_\_\_\_

Are you able to sing harmony ? \_\_\_\_\_

Do you play any musical instruments? \_\_\_\_\_

What other groups have you been a part of in the past?  
\_\_\_\_\_

**Motivation**

Why do you want to be on a vocal team at Grace Church?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How open are you to learning how to improve?  
**a. Lay it on me!   b. O.K. but go easy   c. once-bitten twice shy**  
\_\_\_\_\_

Are you interested in singing in a praise choir this fall? **Yes or No**

Name \_\_\_\_\_ date: \_\_\_\_\_

**Audition (leave this section blank)**

Pitch

Harmony

Blend

Range

Expression

Comfort level

Placement; Soloist  
Small vocal group  
Small vocal group as a supporting voice  
Celebration Choir