

THE YOUTH MILL PERFORMING ARTS AUDITION REGISTRATION FORM

Please complete all sections.

Section A- Personal Details

| | | | | | |
|---|--|-----------------|---|---|--|
| First Name: | | Surname: | | Middle Name(s): | |
| Street Address: | | | Suburb: | | |
| | | | State: | | Post Code: |
| Phone Number: | | | Male <input type="checkbox"/> | Female <input type="checkbox"/> | Other <input type="checkbox"/> |
| Are you of Aboriginal and/or Torres Strait Islander origin? | | | | | |
| <input type="checkbox"/> Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> Both <input type="checkbox"/> Neither | | | | | |
| Your mob: | | | Citizenship: | | |
| Birthdate: | | | | | |
| Email: | | | | | |

Section B- Educational History

| | | | |
|--|--|--------------------------------|--|
| Name of High School/Institution: | | Highest Level of Study: | <input type="checkbox"/> Year 9 or equivalent <input type="checkbox"/> Year 10 <input type="checkbox"/> Year 11 <input type="checkbox"/> Year 12 <input type="checkbox"/> Did not attend |
| What year did/will you finish school? | | | |

| | |
|---|--|
| Completed post-school qualifications: | <input type="checkbox"/> Certificate I <input type="checkbox"/> Certificate II <input type="checkbox"/> Certificate III <input type="checkbox"/> Certificate IV <input type="checkbox"/> Diploma <input type="checkbox"/> Advanced Diploma <input type="checkbox"/> Degree |
| What course(s) did you study and what year were they attained? | |

Section C- Performance Experience

Please list your training and experience in each of the following:

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| Music – Vocal & Instrumental: |
| Dance: |

Section D- Interest in TYMPAC

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|---|--|
| How did you hear about TYMPAC | |
| What are you hoping to learn through workshops at TYMPAC? | |
| Workshops will commence: January - March 2025 with consistent attendance required. Please advise of prior commitments. |  |

Section E- Medical History

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|---|--|
| Do you consider yourself to have a disability, impairment, or long-term condition? | |
| Please provide details: | |
| Have you had any serious injuries? | |
| Please provide details: | |

Please note this information is not compulsory with your Audition Application, but will be required at the time of workshop enrolment.

Video Audition Guidelines

Please submit a video audition via link (youtube, vimeo, google drive, etc.) or by attaching the file to your audition application email and send to info@theyouthmill.com.au.

For your audition we ask that you prepare:

- Two performance pieces in contrasting styles. For example:
 - o MUSIC- Sing or play two contrasting musical pieces, i.e. up-tempo and ballad

HOW TO START YOUR VIDEO:

- o Introduce yourself
- o Tell us which discipline of music, vocal & instrumental genre you prefer
- o Tell us why you want to participate in a TYMPAC workshop

Terms and Conditions of TYMPAC progressing to workshop application and enrolment:

It is the responsibility of any person (and their carer/guardian if under 18 years) who is offered a place after an audition and progresses to application to:

- a. Disclose all health conditions. This is a pre-condition of acceptance into enrolment and a condition of ongoing enrolment and or provision of support
- b. Sign below that information in this audition request form is complete and correct

Section F- Declaration

I hereby declare that the information given on this form is complete and correct:

| | | | |
|--|--|---------------|--|
| Name: | | Date: | |
| Signature: | | | |
| If applicant is under 18 years of age, this form must be signed by a parent/guardian. | | | |
| Parent/Guardian Name: | | Date: | |
| Email: | | Phone: | |
| Parent/Guardian Signature: | | | |

