



# SHARJAH MAR THOMA CHURCH CHOIR

P. O Box No: 2106; SHARJAH - UNITED ARAB EMIRATES

TEL: 06-5662627 FAX: 06-5674879

Date:.....

## Application Form for Choir Audition

*(Fill in block letters)*

(Affix a  
passport size  
photograph)

Category : Senior  Junior   
Junior to Senior

Name of the Applicant : .....

Father/Spouse/Guardian's Name : .....

Address for Communication : .....

.....

Contact Tel. Nos. : Res. .... Mob. ....

Age & D.O.B : .....

Gender : Male  Female

Marital Status : Single  Married

Church Membership ID No : .....

Area : .....

Home Parish : .....

Home Address : .....

.....

Have you sung with any other choirs before? Yes  No

(If Yes, Please mention)

1. ....

2. ....

Do you play any Musical Instruments? Yes  No

(If Yes, Please mention)

1. ....

2. ....

Signature:.....

### Office Use Only

Sl.No : .....

Date : .....

Rank : .....

Selected : Yes  No

Group : .....

Remarks : .....

Approved by : ..... (Vicar, MTC Sharjah)