



Application for IMPACT Tryouts – 2017

Name _____ Age _____ Birthdate _____

Grade in School _____ Name of High School _____

Mailing Address _____, SC _____
Street or PO Box City Zip

Email Address _____

Student Cell _____ Phone (Other) _____

What singing part are you auditioning for? Soprano Alto Tenor Bass Have no idea

Do you play an instrument? _____ If so, what? _____

Do you play well enough for concert performance? _____ How long have you played? _____

Are you singing a solo or with a group for TNT? _____

Home Church _____ Church of the Nazarene

How long have you attended? _____ Pastor/Youth Pastor's Name _____

When were you saved? _____ Give a brief testimony that tells about your relationship with Christ.

Do you regularly attend...

- Youth services at your church? _____
- Worship services at your church? _____
- Sunday School/Small Group? _____

If no, why not? _____

Why do you want to be a member of the Impact Team?

Are you under a doctor's care? _____ If yes, for what reason? _____

Prescription medication(s) you are currently taking _____

Being a member of the District IMPACT Team is a high honor as you represent Christ and the NYI of the SC District. It is also a great opportunity for you to share Christ with others. If selected I will:

- Continue to be committed to my local church & strive to remain a leader & Christian example
- Attend all scheduled rehearsals
- Attend District Youth Camp
- Cooperate with the IMPACT Director, Adult Leaders and Local Church Leaders
- Be a committed, cooperative team member

Signed: _____ Date _____

Audition Procedures:

- You will be asked to sing a worship song from a song list. You will be asked to sing a verse and chorus alone and in parts with an ensemble. Scales will be used to evaluate range.
- You will be interviewed about yourself and your walk with Christ.

If you are auditioning for an instrumental part...

- Be prepared to play a song of your choice
- You will be asked to play a song given to you by the evaluator
- You will be interviewed about yourself and your walk with Christ

Include in Your Application...

- Completed application form
- A letter of recommendation, from your Pastor, Youth Pastor, or NYI President by February 1st

Bring to TNT or Mail to Pastor Mike McAdory
P.O. Box 645
Clearwater, SC 29822

Questions: Contact Mike McAdory at 803-593-3114 or mikemc@mvnazarene.org