

# SETON HILL UNIVERSITY YOUTH HONORS JAZZ BAND APPLICATION



## 2024-2025 Jazz Band Schedule:

Students must attend all rehearsals and the concert!  
NEW! Auditions by video submission only!

## VIDEO AUDITIONS DUE

November 22nd, 2024  
Email to [walters@setonhill.edu](mailto:walters@setonhill.edu)

## Rehearsals

Thursday Feb 20th, 5 pm - 7 pm  
Thursday Feb 27nd, 5 pm - 7 pm  
Saturday, March 1st, noon - 4 pm  
Sunday, March 2nd, noon - 2 pm

## Concert

Sunday, March 2nd - 3 pm  
Reception immediately following concert for all performers, families, and friends

## Tickets are \$6

Concert tickets available on [setonhill.edu/tickets](http://setonhill.edu/tickets) or by calling or emailing the Box Office.  
724-552-2929 or [BoxOffice@setonhill.edu](mailto:BoxOffice@setonhill.edu)

## Rehearsal and Concert Location:

Seton Hill University Performing Arts Center  
100 Harrison Avenue, Gbg, PA 15601

## Tuition:

\$10.00 audition fee (paid with application)  
\$65.00 per accepted student (paid before first rehearsal)

## Audition Information:

Applicants must be in 6th, 7th or 8th grade during the 2024-2025 school year and should prepare the solo work for their instrument from the approved literature list. ([list available on website](#))

Please make a video recording of musician playing the required audition piece and email to [walters@setonhill.edu](mailto:walters@setonhill.edu) by the listed deadline.

**Please note:** The solo list has been updated and is also available online at: [www.setonhill.edu/cmp](http://www.setonhill.edu/cmp). Pieces are available at the links listed on the document or any other dealer with the correct publisher and arrangement.

**Questions:** Contact Michelle Walters at 724-552-2923 or [walters@setonhill.edu](mailto:walters@setonhill.edu).



## 2024-2025 Honors Jazz Band Application

Please print clearly.



Student: \_\_\_\_\_ Instrument: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ School: \_\_\_\_\_

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

Signature of Band Director or Private Teacher: \_\_\_\_\_

Band Director or Private Teacher name (please print): \_\_\_\_\_

I, the parent/guardian of the student listed above, understand that my child is auditioning for the Youth Honors Band and that I will have him/her/they participate in **all the rehearsals and the concert listed above** if selected. I also understand that the adjudication comments will not be available immediately following the audition process.

Signature of Parent/Guardian: \_\_\_\_\_

Parents/Guardians (please print): \_\_\_\_\_

Return this form with payment of \$10.00. Make check payable to **SHU**. Video submissions are due by the deadline below.

Community Arts Program, Box 390F, One Seton Hill Drive, Greensburg PA 15601

**Application and Video Submission Deadline: Wednesday, Nov. 22nd, 2024**