## NORTH CENTRAL WEST VIRGINIA HONOR BAND

Application Form (both front and back), please return by October 1st, 2025.

	Personal Information
Name: Home Address:	Instrument(s)
Home Address:	Email:
City: St: Zip:	
City: St: Zip:	Year in School: 9 10 11 12 (Circle) T-Shirt Size:
Home Phone:	
	School Information
School Name:	Band Director:
School Address:	BD's Cell/Home Phone
City:	BD's email address:
St:Zip:	
School Phone	
Principal:	
	Selection Information
I. All State Participation:	
1. An State 1 at despation.	
Have you ever auditioned successfully for All-	State Band?
What year(s)? Instrument?	What chair(s)?
Other information:	
II. Solo/Ensemble Participation and/or other	er musical honors and activities:
-	
Have you ever participated in solo/chamber ens	semble festivals?
What year(s)? Instrument?	Ratings Received?
Other information:	
Other information:	
HI OI H C P III I	
III. Other Honors Group Participation:	
Places describe any other honor argamble avne	erience you have had. Include date, location, instrument, and chair
placement.	frence you have had. Include date, location, histrument, and chair
pracement.	

1v. Statement of Commitment:	
I, (print name)	on as a contributing member. This means I will be punctual
Student Signature	Date
I give my child permission to participate in the WV Wesleyan N terms of participation, and will make travel arrangements for that	
Parent Signature	Date
V. Band Director's Evaluation/Recommendation: (to be completed and sent after the student completes and significant please rate this Honors Band Candidate in the following categor 1=Poor 2=Fair 3=Good 4=Excellent	•
Musicianship Character Preparation_	Dependability
In comparison to the other students you are recommending, ho most deserving to attend this event? Ranking # of separate piece of paper.	
This student applicant has demonstrated outstanding musical Wesleyan College North Central WV Honor Band. In addition necessary to successfully participate in a music ensemble.	
Band Director Signature	Date
Principal Signature	Date

VI. Selection: (please do not write in this space)

Return by October 1st to: Eliza Taylor, Director of Athletic Bands By: US mail, e-mail, or Fax 59 College Avenue Buckhannon, WV 26201 taylor.e@wvwc.edu Fax- 304-473-8108