

Parent or Guardian Signature Sheet

I, (name of the parent or guardian) _____ have
read through the Croixaliers Audition Cover Letter with my student _____.

We understand the unique ministry of the Croixaliers. We support the guidelines and
audition procedure outlined in the cover letter, as well as the rehearsal times and public
performance times. We will support the work of the Croixaliers as best as we are able.

NAME OF PARENT OR GUARDIAN (print please) _____

PARENT OR GUARDIAN SIGNATURE _____

Date _____

NAME OF STUDENT (print please) _____

STUDENT SIGNATURE _____

Date _____

Please return this sheet to Mr. Pufahl at the time of your audition.