

Lehigh University Choral Union

Change Form

Date _____

Name _____

*Please fill in below only the information that has changed and print legibly.
Thank you!*

1. Contact Information:

Address _____ City _____ State _____ Zip _____

Work Phone () _____ Home Phone () _____

E-Mail _____

2. Voice Part: *Please circle one*

Soprano I Soprano II Alto I Alto II

Tenor I Tenor II Baritone Bass

3. History/Performance Statistics:

Height In Concert Shoes ___ft. ___in.

Number of Years You Have Sung in Choral Union _____

4. Other Involvement: *Please circle all activities in which you have participated or are presently involved within Lehigh University Choral Arts*

Handbells _____ Vespers Reader _____ Section Leader _____

University Choir _____ Other _____
(Please List)

Form continued on reverse

5. Please complete the section which best applies to you:

A. Lehigh University Student:

Year _____ Anticipated Graduation Date _____

Circle One: Undergraduate Graduate

Degree Pursued _____ Major _____

Degree Pursued _____ Major _____

B. Lehigh University Faculty:

Position _____ Department _____

C. Lehigh University Staff:

Position _____ Department _____

D. Community:

Profession _____ Retired _____

E. Lehigh University Alumni:

Class _____ Degree _____ Major _____

Class _____ Degree _____ Major _____