Musical Arts Competition of Orange County

<u>2020 Student Audition Entry Form</u> (Type or Print Clearly)

Name of Teacher:		Phone ()		E-Mail				
Address:			CityZ		Zip:Instrument:			
It is understood that stud	dents can or	nly be entered by the	ir teacher. A student e	ntered under ar	nother teacher's name v	vill be disqualif	ied.	
Student Name (Type or Print)	Date of Birth	Address/ Phone/E	-Mail			Instrument	Section #	Entry Fee
First Name:	Date:	Phone #: ()	E-mail ,					
Last Name:	Age:	Address:		City & Zip		- 1	-1	
Repertoire Composer 1.	Title, Opus/ h	 (ey	Movemen	nt Book			Page	-
Repertoire Composer 2.	Title, Opus/ k	Сеу	Movemen	nt Book			Page	-
First Name:	Date: / /	Phone #: ()	E-mail ,					
Last Name:	Age:	Address:		City & Zip			_1	1
Repertoire Composer 1.	Title, Opus/ h	 Key	Movemen	nt Book			Page	-
Repertoire Composer 2.	Title, Opus/ k	Сеу	Movemen	nt Book			Page	-
First Name:	Date: / /	Phone #: ()	E-mail ,					
Last Name:	Age:	Address:		City & Zip				
Repertoire Composer 1.	Title, Opus/ k	 Key	Movemen	nt Book			Page	-
Repertoire Composer 2.	Title, Opus/ k	Сеу	Movemen	nt Book			Page	1
Note: Use age Before April 2 Fotal Number of entries :	0 th , 2020** Students	Mailing Fee (\$5)*E	Mailing Fee (\$5)*Entry Fee (\$45) per student* (\$20) per student in each chamber group (up to 5 members per group)* Non-involvement fee (\$30) 1-5 students*		All teachers are requested to assist on audition days or pay an extra fee* Total of studentsTotal of hoursAssist area			Fee
Accompanist's Name:		5 members per gr Non-involvement f			To have certificates and adjudicator sheets mailed, include a \$5 Mailing fee.* Mailing Fee: \$5 required			
		16 or more studen Photocopies of th				Grand Tot	:al*	

Mailing Address:

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^{**}Proof of age required(Birth Certificate or Passport).