

Concert Festival Audition Application

I am applying for:

- Fall Season Concerts 2018
- Spring Season Concerts 2019
- Solo Recital (program up to 30 min.)
- Concerto Competition (to play solo with an orchestra)
- Summer Tour 2019

First Name, Last Name _____

Date of Birth _____

Street Address, City, State, Zip _____

Phone _____ Email _____

Instrument _____

Audition Repertoire, Composer _____

Duration _____ min _____ sec

I'd like to take audition:

- in Manhattan, Saturday, January 26, 2019
- on Long Island, Saturday, February 2, 2019
- on Long Island, Sunday, February 3, 2019
- by VIDEO/DVD I'm sending by mail
- by my YouTube link below

My YouTube Link _____

Teacher's Name, Address, Phone, Email _____

Comments _____

Notification of acceptances into the festival as well as the date and venue chosen will be made after all auditions are completed. Information regarding performance fees and additional ticket purchases are available online.

*Terms and Conditions: **1** - By participating in the Concert Festival the candidates accept its terms and conditions, and recognize the jury decisions as final. **2** - The Concert Festival may videotape all performances and may use the contestants name, photograph and other related background materials for publicity - newspapers, television, radio. **3** - Concert Festival assumes no liability for medical emergency or other health related expenses and no liability for damage, theft or injury which may occur during the course of the program. **4** - By signing my name below I'm agree with the terms and conditions of the Concert Festival.*

Parents/Guardian Signature _____