



Lehigh Valley Chapter PMTA Achievement Awards Auditions

APPLICATION

Date: _____

Check here if a sibling is entered.

Student #

_____ Time request
(If necessary)

assigned by the teacher*

Please type or print clearly the information below:

Name: _____ Age: _____ Grade: _____

Telephone Number: _____ E-mail Address: _____

Instrument: _____ Category: _____

Number of previous years student received a Superior Plus: _____

Please note changes in rules and regulations for repertoire

Composition

Composer

Playing Time

(rounded to the nearest ½ min.)

Please check one: If eligible to play in the honors recital on the Sunday following the auditions

I will attend

I will not attend

Teacher's Name: _____ Phone: _____

E-mail Address: _____

Mail all applications, judges rating sheets, and the alphabetical student roster together with one check made payable to LVC/PMTA for the total amount of entries (\$15.00 per entry) postmarked by the due date.

*Teachers are to assign a student number to each application, i.e., teacher code-1, teacher code-2, teacher code-3, etc. Teacher codes are found on our website at www.lvpmta.org "Achievement Awards" or by contacting the chairperson.