

For office use:

8/01

Date \_\_\_\_\_ Room \_\_\_\_\_ Time \_\_\_\_\_ Event No. \_\_\_\_\_ Rating \_\_\_\_\_ Points \_\_\_\_\_

**DELAWARE STATE MUSIC TEACHERS ASSOCIATION, INC.**

*Affiliated with the Music Teachers National Association, Inc.*

**The Mildred M. Gaddis Music Festivals - Instrumental Solo & Ensemble**

To be filled out by teacher. Please send **original and 2 copies** with check to Festival Chairman.

Please type or print **legibly** to prevent secretarial errors OR a fee may be charged for correction.

<b>*ENSEMBLE:</b> LIST NAMES OF SEPARATE ENSEMBLE MEMBERS TOGETHER WITH PHONE NUMBERS ON REVERSE SIDE. LIST THEIR INSTRUMENTS AS WELL.	Name of soloist or ensemble* (Last name first)		Birth date (soloist)		
	Address (include zip)			Phone Number	
	School years of study: With current teacher _____ yrs. With former teacher(s) _____ yrs.				
	Solo Instrument	School Name	Grade	School Music Teacher	

<b>PRIVATE TEACHER</b>	Name		Phone Number	
	Address (include zip)			

<b>DIVISIONS</b> <i>Separate applications should be submitted for each event.</i>	<b>INSTRUMENTAL SOLO</b>			<b>INSTRUMENTAL ENSEMBLE</b>		
	Primary	_____		Primary	_____	
	Intermediate	_____	Adv. Inter. _____	Intermediate	_____	
	Advanced	_____		Senior	_____	

<b>REPERTOIRE</b>	Title	Key	Op. No.	Mvmt.	Composer
	1	_____	_____	_____	_____
	2	_____	_____	_____	_____
	3	_____	_____	_____	_____

<b>FEES/TIME RESTRICTIONS</b> <i>May not exceed 10 minutes</i>  <input type="checkbox"/> Check if first time in Festival (soloist only) <input type="checkbox"/> Check if in Theory Festival  <input type="checkbox"/> Check if Graduating Senior	Application fee is \$10 for each entry regardless of the length of performance time. Ensembles may divide up the fee accordingly.				
	Total performance time for soloist or ensemble _____ minutes			Teachers not members of DSMTA or DMEA must include a \$50 fee which may be applied toward membership in DSMTA _____ or DMEA _____	
	<b>All applications \$ 10.00</b>			Non-member Teacher Fee \$ _____	

<b>ACCOMPANIST</b> <i>If evaluation desired, include "Application to Accompany"</i>	Name	Phone Number	Teacher
	_____		

Evaluation \_\_\_\_\_ No evaluation \_\_\_\_\_

NOTE: An accompanist may be judged only once for playing the same selection. Coaching is the responsibility of the soloist's teacher.

<b>SPECIAL SCHEDULING NEEDS</b> <i>Music stands, seating, etc. Use reverse side, if needed.</i>	Teachers should send ONE CHECK made out to "DSMTA" to cover all of their students plus non-member teacher fee) to the Festival Chairman by the application deadline. Please refer to the DSMTA Calendar of Events in Handbook to find this deadline and to the Board of Directors' listing to find the current Instrumental Festival Chairman.
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