

# APPLICATION FORM: 24<sup>th</sup> Annual Milton Young Musicians Festival

Deadline for Application: Monday, April 12, 2010 — Festival Date: Saturday, May 8, 2010  
Festival Location: Kellner Performing Arts Bldg., Milton Academy

[www.MiltonYoungMusicians.org](http://www.MiltonYoungMusicians.org)

APPLICANT (please print clearly) \_\_\_\_\_ date rec'd \_\_\_\_\_

INSTRUMENT/VOICE LEVEL \_\_\_\_\_ LEVEL \_\_\_\_\_ Grade \_\_\_\_\_

TITLE(s) and COMPOSER(s) \_\_\_\_\_

Level 1–3: Students are given a 10 minute audition time to perform requirements plus repertoire.

Level 4–6: Students are given a 15 minute audition time to perform requirements plus repertoire.

**NOTE: Requirements and repertoire lists for all levels and categories may be found in the Milton Public Library, 2<sup>nd</sup> floor reference desk.**

**FEE SCHEDULE** All fees are non-refundable. Fees are due with application form, no later than April 12. Please make checks payable to: **Milton Young Musicians Festival**

Basic Registration, any Level ..... \$30.00 \_\_\_\_\_

\* *Late Basic Registration* for applications received after the April 12 deadline. \$35.00 \_\_\_\_\_

\* **Late Applications** will be accepted subject to scheduling availability, and will be scheduled at the end of the day without exception.

**If you prefer to perform with an accompanist but need a referral, please notify Mrs. Moulton\*. Our Festival Accompanists provide their services for the following rates (paid directly to the Accompanist):**

levels 1-3: \$25 (15 min. rehearsal) + \$25 Festival Audition; \$25 Gold Medal Concert (if applicable)

levels 4-6: \$50 (30 min rehearsal) + \$25 Festival Audition; \$25 Gold Medal Concert (if applicable)

I will provide my own Accompanist. Name: \_\_\_\_\_

I need a special time consideration (please specify): \_\_\_\_\_

**STUDENT'S LOCAL MAILING ADDRESS (please print CLEARLY);**

Street: \_\_\_\_\_ Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Parent/Guardian's E-mail \_\_\_\_\_

Teacher's Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Street: \_\_\_\_\_ Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Tel.: \_\_\_\_\_

**STUDENT'S SCHOOL AND MAILING ADDRESS (for publicity)**

School Name: \_\_\_\_\_ Street: \_\_\_\_\_ Town/ZIP: \_\_\_\_\_

**ENDORSEMENT SIGNATURES:**

Private Teacher: \_\_\_\_\_ School Music Teacher (optional): \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ DATE: \_\_\_\_\_

**Return this form with Registration Fee to Emma Jean Moulton, Artistic Director, MYMF  
\* 435 Eliot St, Milton, MA 02186 — (617) 698-3200 — emmadon@aol.com**

This program is supported in part by a grant from the Milton Cultural Council, a local agency, which is supported by the Massachusetts Cultural Council, a state agency.