

2012 OhioMTA/Graves Piano Solo & Ensemble Competition

Please photocopy this application form, using one form per event. No fax or e-mail applications.

Please see complete rules and regulations on other page.

Improper or incomplete applications will be returned. There will be no exceptions. Decisions of the chairmen are final.

Solo/Duet/Duo (circle one)

Name _____
Age _____ Category _____
Phone (____) _____ email _____
Local Newspaper _____
Teacher _____
Teacher's address _____
Teacher's city _____ State _____ Zip _____
Phone (____) _____ email _____
Member/non-member (circle) application fee of \$ _____.
Student has studied with the current teacher since _____.

Duet/Duo Partner

Name _____
Age _____ Category _____
Phone (____) _____ email _____
Local Newspaper _____
Teacher _____
Teacher's address _____
Teacher's city _____ State _____ Zip _____
Phone (____) _____ email _____
Member/non-member (circle) application fee of \$ _____.
Student has studied with the current teacher since _____.

Repertoire:

1) Title/Opus/Mvt. _____
Composer _____
Performance
Time _____ min. _____ sec.
2) Title/Opus/Mvt. _____
Composer _____
Performance Time _____ min. _____ sec.

Solo/Duet/Duo (circle one)

1) Title/Opus/Mvt. _____
Composer _____
Performance
Time _____ min. _____ sec.
2) Title/Opus/Mvt. _____
Composer _____
Performance Time _____ min. _____ sec.

Registration forms must be postmarked on or before January 6, 2012. Please allow up to 5 weeks for schedule notification. The OhioMTA/Graves Competition is not responsible for wrong addresses, US Post Office errors, etc.

Send application form and a check (one check per teacher studio) for the total entrance fees made payable to OhioMTA to:
OhioMTA/Graves Competition
Bruce Piper, Chairman
7018 Nichols Lane
Johnstown, OH 43031

Contact email bpiper0378@gmail.com
740-967-0378

STUDENTS OF NON-MEMBERS MUST PAY DOUBLE THE STUDENT REGISTRATION FEE.

Competition Agreement

It is the responsibility of the teacher, entrant and parents (for entrants below the age of 18) to read and abide by the rules applicable to the OhioMTA/Graves competition and, by signature, certify to this fact. Any variation will result in the disqualification of the entrant. The undersigned verify that the information submitted on the Official Application Form is complete and accurate, and that the teacher paid OhioMTA and MTNA dues on or before the application.

Signature of Teacher _____ Date _____

Signature of Contestant _____ Date _____

Signature of Parent or Guardian _____ Date _____