



ENTRIES MUST BE RECEIVED BY SUNDAY 10th JUNE 2018
ESPERANCE MUSIC FESTIVAL ENTRY FORM

Participants must adhere to conditions and time limits as stated in the schedule

EMF USE ONLY	
RECEIPT No:	ITEM No:

REGISTRATION DAY: **SEVENTH DAY ADVENTIST CHURCH, 43 FOY ST, SUNDAY JUNE 10th 2018: 10.00am – 2.00pm**

ITEM No.		ITEM NAME:	
ENTRY FEE	\$	CASH <input type="checkbox"/> CHQ <input type="checkbox"/>	SECTION:

PERFORMER NAME(S) Use individual performer's names for solo/duet	PHONE	INSTRUMENT	AGE AT 10/06/2018	DOB
1				
2				
3				
4				
GROUP NAME: <small>eg trios, quartets, groups, ensembles, choirs, bands.</small>	Please use a group name for 3 or more performers, NOT just first names.			No. of performers

Piece 1 TITLE:	Performance Time
Composer:	min. ____ sec. ____
Arranger:	
Piece 2 TITLE:	Performance Time
Composer:	min. ____ sec. ____
Arranger:	

CONTACT PERSON:	NAME:	PHONE:
ADDRESS:		MOBILE:
EMAIL:		

PERFORMER'S TEACHER 1:	NAME:	PHONE:
EMAIL:		MOBILE:
PERFORMER'S TEACHER 2:	NAME:	PHONE:

PERFORMANCE RESTRICTIONS: Specific times unavailable/reason:

ENTRY FEES		HAVE YOU:
Solo	\$10.00	ENCLOSED PHOTOCOPIES OF YOUR MUSIC?
Duets, Ensemble	\$ 5/person (max \$30)	COMPLETED & SIGNED THE DECLARATION FORMS?
Choirs, Bands etc	\$30 + music	MADE YOUR CHEQUE PAYABLE TO ESPERANCE MUSIC FESTIVAL Inc?
		ENCLOSED YOUR ENTRY FEE?
		ENTERED PERFORMANCE TIMES, INCLUDING THE ACCOMPANIMENT?

I will be using a backing track – YES [<input type="checkbox"/>] NO [<input type="checkbox"/>] Please tick or highlight
