

**LYNN FREEMAN OLSON COMPOSITION AWARDS
Biennial Awards - Odd Years; Application Form**

JR 8-2

Mail to: *James Schnars*, 331 Cleveland Street, Apt 804, Clearwater, FL 33755

(Please print; leave no blanks)

Applicant's Name: _____

Birth Date: _____ Age (March 1) _____

Address: _____

City/State/Zip Code: _____

Telephone: () _____ Cell: () _____ E-mail: _____

Enter category: ** Intermediate High School Advanced

Area of Study: _____ Teacher's Name: _____

(piano, theory, composition, etc.) Address: _____

Telephone: _____

Composition Title: _____ Performance time: _____

- ** Intermediate: Grades 7-8-9 at application closing date
 High School Grades 10-11-12 at application closing date
 Advanced: High school graduates through age 25 at application closing date

THE UNDERSIGNED VERIFY THE FOLLOWING:

- Current NFMC Membership:
 Individual Club Member Mass Enrollment
 Club or school name: _____
- New membership - check enclosed (see Requirements and Regulations)
- The applicant is currently studying music, and has prepared the composition according to the Requirements and Regulations (JR 8-1)
- The composition entered was composed exclusively by the applicant.
- The applicant has not been the recipient of a prior award in the category entered.

I hereby certify that I have read the complete Requirements and Regulations (JR 8-1) and understand that my failure to abide by them will result in disqualification.

Signature of applicant: _____

Signature of Parent or Guardian: _____

(Intermediate or High School levels only.)

By signing this application, the applicant grants permission to reproduce, through the photocopy process, any additional copies of the manuscript deemed necessary to complete the judging.

While all composition rights remain with the composer, it is further agreed that, should a composition be published after receiving an award, the designation "A Lynn Freeman Olson Composition Award Winner" will appear on the front cover.

How did you hear about this award? _____

Note: NFMC winners will be required to submit their social security number and form W-9 to the NFMC Treasurer (IRS rule).