



STUDENT/COLLEGIATE AUDITIONS
Biennial - Odd Years
Application Form

ST 1-5
Available Online

The entrant should complete this application. Send 2 copies to the state chairman postmarked by January 15 with an entry fee of \$30.00

AGE LIMITS IN THE AUDITION YEAR (as of January 15): Instrumental & Voice 19 through 25
(Applicants must have reached the 19th but not the 26th birthday by the application deadline)

Classification (check the one classification in which you wish to enter):

- ___ Piano ___ Woman's Voice ___ Double Bass ___ Flute ___ Orch. Woodwinds ___ Orch. Brass
___ Organ ___ Violin ___ Percussion ___ Oboe ___ French Horn
___ Harp ___ Viola ___ Classical Guitar ___ Clarinet ___ Trumpet
___ Man's Voice ___ Violoncello ___ Bassoon ___ Trombone
___ Saxophone

Name _____ S/S # _____ (IRS requirement for winner only)

Address _____ City _____ State _____ Zip _____

Student's School Address _____

Student's School Phone () _____ E-Mail _____

School Now Attending _____ Phone () _____

Address _____ City _____ State _____ Zip _____

Present Music Teacher _____ Phone () _____ E-mail: _____

Address _____ City _____ State _____ Zip _____

On the back of this page, please list other music teachers, length of study, dates.

On my honor I swear that I am an American citizen born on _____ in _____
(Date of birth) (Place of birth)

Or naturalized on _____ in _____
(Date of naturalization) (Place of naturalization).

___ I am a member in good standing of the NFMC student/collegiate organization
Name of Group _____ City _____ State _____

___ I am a student/collegiate individual member in good standing.

___ I hereby apply for student/collegiate individual membership and enclose the membership fee of \$16 (Make check payable to National Federation of Music Clubs.)

Attached, as required, are nine (9) copies of the list of selections to be performed for auditions.

I certify that I have read the audition entrance and repertoire requirements and that I am eligible to enter these auditions. I promise to comply with all conditions and requirements of the official student/collegiate audition rules and to cooperate fully with all audition officials.

Signature _____ Date _____

STUDENT/COLLEGIATE AUDITIONS - CERTIFICATION LETTER # ST 1-15

(To be observed by an impartial person

I certify that the CD made on (date) _____ by

(student's name) _____

singing or playing an instrument (type) _____

was in accordance with national auditions rules. These include:

- Performance from memory, where applicable. See repertoire list for various categories
- Uninterrupted performance, excepting necessary breaks between numbers
- Selections played according to the required repertoire list
- Disc should contain the entrant's entire repertoire as approved by the NFMC Student/Collegiate Auditions chairman.

Signed _____

Address _____

City, State, Zip _____

Phone () _____

Witness to Recording: _____

State _____

Student's Name _____

Address _____

City, State, Zip _____

Phone () _____