



Preferred Audition Time: _____

Dorothy Sutton Performance Festival 2019

Student Local Registration Form

Student Name: _____ Age (as of Nov 1): _____

Address: _____
Street City/Zip

Instrument: _____ Grade in School: _____ Length of Study: _____

Teacher: _____ Teacher Phone #: _____

List any siblings participating in DSPF: _____

Theory Level (Primer - level 6. Piano only: primer - level 8)

Piano	_____	Treble instrument	_____
Guitar	_____	Bass instrument	_____
Vocal Treble Clef	_____	Alto instrument	_____
Vocal Bass Clef	_____		

Note any special accommodations needed for the student during the theory test (ex. have test read aloud):

Repertoire: Check guidelines at www.pamusicteachers.org. Include opus number, tempo, and name of movement. *Total time must be precise!*

Composer	Name of Composition	Length (min/sec)
_____	_____	_____
_____	_____	_____

Teacher's Authorization Signature: _____

Parent Media Release Permission: I give permission for LMTA to use for promotional purposes:

- Photos or videos of my child with no name attached
- Photos or videos of my child with first name attached
- Only group photos with no name attached
- None of the above

Parent/Guardian Signature: _____ Date: _____