

72nd ANNUAL KIWANIS MUSIC FESTIVAL OF SUDBURY - 2017
SOLO ENTRY FORM – ENTRY CLOSING DATE: JANUARY 15, 2017 (NO LATE ENTRIES ACCEPTED)
 Mail to: 469 Bouchard St., Suite 207B, Sudbury, ON P3E 2K8

***** PLEASE PRINT CLEARLY ***** PLEASE PRINT CLEARLY ***** PLEASE PRINT CLEARLY *****

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|---|--|---------------------------------------|----------------------------|-----------|
| Competitor LAST Name | | FIRST Name | | MF |
| Age on January 1, 2017 | Birthdate: (mm/dd/yy) ____/____/____ | Instrument/Voice Type | Current Grade Level | |
| Address | | Apt. | City | |
| Address | | Postal Code | | |
| Home Telephone | | Work Telephone (include ext.) | | |
| Cell Phone | | Email | | |
| Name of School Currently Attending (PLEASE INCLUDE): | | School Board (PLEASE INCLUDE): | Grade Level: | |

| | |
|----------------------------|--------------------|
| Teacher's Last Name | First Name |
| Address | Address (2) |
| City | Postal Code |
| Telephone: Home | Work |
| Email: | |

SOLO

| Class Code | Description | Title (incl. Op., movt. etc. when applicable) | Composer | Time | Fee |
|---------------------|-----------------------------|--|-----------------|-----------------------------|------------|
| <i>e.g. P-08-S9</i> | <i>Grade 8 Canadian</i> | <i>"Mazurka"</i> | G. Coumts | <u>2</u> m. <u>0</u> sec | \$20 |
| | | | | <u> </u> m <u> </u> sec | |
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|---|---------------|--|-------------|-------------------|------------------|
| ACCOMPANIST NAME (if applicable) | | TOTAL ENTRY FEES: | | | |
| SPECIAL SCHEDULING REQUESTS (please note that not all requests can be accommodated – See General Rules) | | ABSOLUTELY NO LATE ENTRIES ACCEPTED | | | |
| | | Yes, I would like to become an Official Patron (any amount) and/or Sponsor a Session (\$50) at the 2017 Music Festival | | | DONATION: |
| | | 2017 OFFICIAL PROGRAM: (program is mailed to subscriber approx. one week prior to festival) - optional | | | (\$15.00) |
| | | TOTAL AMOUNT: | | | |
| <i>Please circle:</i> | Cheque | Money Order | Visa | Mastercard | |

ALL CHEQUES AND MONEY ORDERS ARE TO BE MADE PAYABLE TO: **KIWANIS MUSIC FESTIVAL OF SUDBURY – CASH NOT ACCEPTED**

| | | |
|-------------------------------------|---------------------|---------------------------------|
| Card Number: (print clearly) | □□□□ □□□□ □□□□ □□□□ | Expiry Date: _____ MM/YY |
| Name on card: | | Billing Address: |

ENTRY FORM MUST BE SIGNED ON REVERSE SIDE FOR ENTRY TO BE ACCEPTED

BELOW PLEASE LIST THE ENSEMBLES THAT THIS MUSIC STUDENT IS ALSO PARTICIPATING IN:

| (for scheduling purposes) | |
|---------------------------|---|
| CLASS CODE | NAME OF DUET/TRIO/ENSEMBLE/CHOIR/BAND |
| e.g. P-08-T or CH-06-S | Smith/Brown/Belanger Trio Sudbury School Grade 6 Choir |
| | |
| | |
| | |

BEFORE FILLING IN YOUR ENTRY FORM, PLEASE READ THE FOLLOWING:

- ♪ Entries must be on official Entry Forms or photocopies of the official Entry Form. For duets, duos, trios, quartets, quintets, ensemble or group entries, please use the ENSEMBLE & GROUP ENTRY FORM.
- ♪ Entries must be completed IN FULL and Signed. Entries that are not complete will be declined by the Committee. All information is required to facilitate scheduling and to determine eligibility for the Ontario Music Festivals Association Provincial Finals.
- ♪ **It is the responsibility of the competitor to read ALL rules** and enter the correct class by CLASS CODE. CLASS CHANGES WILL NOT BE PERMITTED.
- ♪ The **CURRENT YEAR entry fee** MUST accompany each entry. Please be sure you are using the current syllabus and a current entry form.
- ♪ Entry fees **WILL NOT BE REFUNDED**, except under circumstances where the entry is refused by the Committee.
- ♪ ENTRIES CLOSE: 8:00 p.m., **January 15, 2017. ABSOLUTELY NO LATE ENTRIES WILL BE ACCEPTED.**
- ♪ All entries must be sent to the Festival Office – 469 Bouchard St., Suite 207B, Sudbury, Ontario, P3E 2K8. E-mailed entries only accepted with payment by credit card and credit card information must be COMPLETED on the form.
- ♪ *Please consider making a donation along with your entry. The Kiwanis Music Festival receives no funding from government agencies and relies on the support of its donors to ensure its existence. All donors will be listed in the Festival program and tax receipts will be issued for amounts of \$10.00 or more.*

IMPORTANT!

The following release MUST be signed by each student or parent/guardian.

I have read and agree to comply with the rules and notes as stated in the Kiwanis Music Festival of Sudbury Syllabus. I also understand that all information collected on this form and any photos taken during the Festival will only be used for Kiwanis Music Festival purposes and give my permission for the sharing of personal information and or photos for the following purposes: Official Program, Kiwanis Music Festival of Sudbury web site, Provincial and National Music Festival purposes, media press releases, and to create a data base of alumnae for historical records. All applications will be destroyed (shredded) at the end of each fiscal year (September 30).

Date: _____ Signature: _____

Participant if 18 years and over OR
Parent/Guardian for entrants under 18 years of age

Best wishes for a successful performance! See you at the Festival!

VOLUNTEERS NEEDED (please print clearly)

If you have time to offer as a volunteer at the Music Festival, please complete this section.

1. What days of the week are you available? _____

2. What time of day? Morning _____ Afternoon _____ Evening _____

Name: _____

Phone Number: _____

Email: _____