

Weymouth Center for the Arts & Humanities

Young Musicians Festival

February 18-19, 2017

Application Form

Participant's Name _____

Parent's Name _____

Address _____

Email _____

Phone _____ **Cell** _____

Grade _____ **School** _____

Performance Area _____ **Length of Study** _____

Accompanist's Name (if applicable) _____

Phone _____ **Email** _____

Repertoire: Please list title, composer and length of selection (Division 1—10 min.; Division 2—13 min.; Divisions 3&4—15 min.).

A. _____

B. _____

For Comments Only (check if applicable) _____

Music Teacher (Check appropriate blank):

Private Study _____ **Public School** _____ **Private School** _____

Teacher's Name _____

Address _____

Phone (Work) _____ **(Home or Cell)** _____

Email _____

Please return this form with a \$20.00 application fee received no later than Wednesday, February 8, 2017, to: Weymouth Center, P.O. Box 939, Southern Pines, NC 28388. Checks should be made payable to "Weymouth Center" with "YMF" in the memo section. Questions may be directed to Sue Aceves, suebeth@charter.net