



BROADWAY VOCAL SOLO (INCLUDES MOVIE MUSICALS)

NOTE: THE CONTEST FEE WORKSHEET MUST BE SENT WITH YOUR APPLICATIONS

SCHOOL/TEACHER NAME: _____

PHONE: _____

ADDRESS: _____

CITY, STATE, ZIP CODE: _____

EMAIL ADDRESS: _____

PLEASE PRINT OR TYPE ALL INFORMATION

	Last Name	First Name	AGE	DO NOT USE	SELECTION	FROM WHAT SHOW OR MOVIE
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

SUGGESTIONS FOR TEACHERS: before submitting applications, check with parents for available dates regarding Communion, Weddings, etc. If the student is competing in more than one category, or has brothers or sisters in the contest, and the family wishes to have all contest activities scheduled for the same day, please designate a day preference. Again, please note this special handling is for a specific day for **PIANO SOLO** contestants, and not for a specific performing time.
ALL VOCALS PERFORM ON SATURDAY.

NOTICE: ONLY **ONE** CHECK OR MONEY ORDER WILL BE ACCEPTED TO COVER ALL ENTRIES. CASH IS **NOT** ACCEPTED! MAKE CHECKS OR MONEY ORDER PAYABLE TO **AND MAIL TO:**

ILLINOIS MUSIC ASSOCIATION
5004 N. CANFIELD
NORRIDGE, IL 60706
Phone: PAT: 708-250-9630
PHYLLIS: 708-712-7497

All contestants must be able to present a copy of a Birth Certificate as proof of age.

Membership Dues: schools and teachers must pay non-member entry fees if their membership dues are not paid before contest deadline date!