

VMTA DISTRICT AUDITIONS (Northern)

Date of Northern District Auditions _____ Application Deadline _____

Location _____ Application Fee _____

STUDENT'S NAME _____ Phone _____

Address _____

School Grade _____ Age _____ School Name _____

Instrument _____ Theory Level Passed _____ Sightreading Level _____

Teacher's Name _____ Phone _____

Teacher's Address _____ Email _____

Length of time studied with this teacher _____

REPertoire:

Composer	Title	<u>Exact</u> timing
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____

Please refer to the VMTA Yearbook for time limits for each level

**Teachers, parents and students agree to abide by the rules of this event.
Judge's decisions will be final.**

Teacher's Signature

Parent's Signature

Student's Signature

Please fill out this form completely. Incomplete applications will not be accepted.