

Student Code: \_\_\_\_\_

Composite Score: \_\_\_\_\_

Please, type or print clearly. Photocopy for your files. Complete all information that applies to the student.

Name: \_\_\_\_\_ Grade/Division: \_\_\_\_\_

Length of study prior to Sept. 1: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade in School: \_\_\_\_\_

Age as of Evaluations Date

Non-Competitive Special needs or accommodations? If necessary, explain: \_\_\_\_\_

**Check medium and circle instrument**

- Piano
- Voice
- Guitar
- Strings: (Vln., Vla, Vlc., DB.)
- Woodwinds: (Fl., Ob., Cl., Bsn., Sax.)
- Brass: (Tpt., Hn., Tbn., Euph., Tuba)

Students may provide their accompanist, or MMTA will provide contact information of available accompanists for State Finals at the request of the teacher.

**Check composite and individual categories entered**

- Four Basics \$25 (perform., tech. skills, sight read., writ. theory)
- Prep Levels Basics \$25
- Technical Skills \$10
- Sight Reading \$10
- Written Theory \$10
- Performance \$15
- Theme & Variations \$15
- Sonata/Sonatina \$15
- Ensemble \$10/person
- SUBTOTAL FEES** \$ \_\_\_\_\_
- Registration Fee \$20 (required)
- MMTA Non-member Fee \$50
- TOTAL FEES** \$ \_\_\_\_\_

**SOLOS (check 2 solo works for State Finals)**

- 1. Title: \_\_\_\_\_ Minutes: \_\_\_\_\_  
Composer: \_\_\_\_\_ Period: B C R Imp Con
- 2. Title: \_\_\_\_\_ Minutes: \_\_\_\_\_  
Composer: \_\_\_\_\_ Period: B C R Imp Con
- 3. Title: \_\_\_\_\_ Minutes: \_\_\_\_\_  
Composer: \_\_\_\_\_ Period: B C R Imp Con  
(For voice grade 12 only)
- 4. Title: \_\_\_\_\_ Minutes: \_\_\_\_\_  
Composer: \_\_\_\_\_ Period: B C R Imp Con

**SONATA/SONATINAS (check 2 solo movements for State Finals)**

- Title: \_\_\_\_\_ Composer: \_\_\_\_\_ Minutes: \_\_\_\_\_
- I. \_\_\_\_\_ Minutes: \_\_\_\_\_
  - II. \_\_\_\_\_ Minutes: \_\_\_\_\_
  - III. \_\_\_\_\_ Minutes: \_\_\_\_\_
  - IV. \_\_\_\_\_ Minutes: \_\_\_\_\_

**THEME & VARIATIONS**

Title: \_\_\_\_\_ Composer: \_\_\_\_\_ Minutes: \_\_\_\_\_

**ENSEMBLES** Will this ensemble require more than one piano?  Yes  No

Title: \_\_\_\_\_ Composer: \_\_\_\_\_ Minutes: \_\_\_\_\_

Ensemble Partner(s): \_\_\_\_\_

**TEACHER:** \_\_\_\_\_ **LOCAL AFFILIATE:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

If, eligible, will your student be participating in the State Finals?  Yes  No