

Markham Music Festival Registration Form – Closing Date – January 18, 2017

Supported by:



Official Piano: STEINWAY & SONS

**PLEASE NOTE:**

- This entry form may be photocopied.
- Incomplete or late applications will not be processed.
- Classes will be scheduled on religious holidays.
- Schedules will be sent to entrants. Should you not receive your schedule by March 3, 2017, please call (905)946-8040 or email to: info@markhammusicfestival.ca

Ent #: \_\_\_\_\_  
Office use only

Name of Entrant: \_\_\_\_\_ E-mail: \_\_\_\_\_  
(First Name) (Last Name)

Address: \_\_\_\_\_  
(Street # & Name) (City) (Postal Code)

Home: (\_\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_\_) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age as of Jan 1, 2017: \_\_\_\_\_

Teacher's Name: \_\_\_\_\_ Tel.: (\_\_\_\_\_) \_\_\_\_\_

Teacher's Address: \_\_\_\_\_  
(Street # & Name) (City) (Postal Code)

Teacher's E-mail: \_\_\_\_\_

\*N.B. CLASS CHANGES NOT PERMITTED.

Class #	Title of Piece	Opus / Movt.	Composer	Duration	Fee
Duet Partner's Name: _____			Date of Birth: _____		
Please make cheques payable to:					Total Fee: \$ _____
<b>Tom Lee Music Co. Ltd.</b>					(Mandatory) Administrative Fee Per Entrant: \$ <u>15.00</u>
8-2651 John St.,					Donation (Thank You): \$ _____
Markham, ON L3R 2W5					(NSF charge - \$25.00 per cheque) Total Enclosed: \$ _____
Tel: (905)946-8040					
Or <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD					
Credit Card No. _____			Expiry Date: _____		
Name _____			Card Holder Signature: _____		

\*Programme may be picked up in person at the above address upon presentation of coupon. Additional programmes can be purchased at the door for \$15.00 ea. (Program coupon will be sent out with schedules by email to entrants by March 3, 2017.)

***I hereby apply to take part in the Competition and agree to abide by the rules and regulations laid down in the 2017 Syllabus.***

\_\_\_\_\_  
Signature (parent/teacher/guardian)

\_\_\_\_\_  
Date