

West Suburban ISMTA Recital Enrollment Form

Total playing time _____

Performance Date _____

1.

Performer's name & age (please print clearly)	
Instrument	
Accompanist's name & instrument (if applicable)	
Teacher's name, phone & email	
Composition complete title	
Full composer's name	
Key, opus #, catalogue #	
Form (duet, trio, concerto)	
AiM level	
Stage needs (circle)	Music stand, 2 nd piano, piano lid up/down, chair for page turner (ensemble work only)
Exact Performance time	

2.

Performer's name & age (please print clearly)	
Instrument	
Accompanist's name & instrument (if applicable)	
Teacher's name, phone & email	
Composition complete title	
Full composer's name	
Key, opus #, catalogue #	
Form (duet, trio, concerto)	
AiM level	
Stage needs (circle)	Music stand, 2 nd piano, piano lid up/down, chair for page turner (ensemble work only)
Exact performance time	

Please contact the Recital Coordinator listed in the current directory with any questions about the WSISMTA Student Recitals. Send this form(s) and one check, payable to WSISMTA, to the Recital Coordinator by the enrollment deadline.

I have read the guidelines (see handbook or website: www.wsismta.org) for entering students in the WSISMTA Monthly Recitals and understand the rules regarding enrollment and repertoire selection.

Teacher signature