

**KINGS COUNTY MUSIC FESTIVAL ENTRY FORM
(One Class per Entry Form)**

Name of Competitor(s) _____

Address: _____

Postal Code: _____ H.Phone: _____ W. Phone: _____

Age(as of December 31) _____ Grade in School (if applicable): _____

Email address: _____

Parent/Guardian's Name: _____

Music Teacher's Name: _____ Phone: _____

Accompanist's Name: _____ Phone: _____

Class Entered: _____ Number of Members in Group or Ensemble: _____

Please indicate whether entering **Competitively** or **Non-Competitively**

Name of Test Piece and/or Own Choice Selection (s)

Title

Composer's Full Name

(1) _____

(2) _____

(3) _____

Source of test piece and page number: _____ Page: _____

Amount of time needed for your performance: Minutes: _____ Seconds: _____

Entry Fee Enclosed \$ _____ Other Classes Entered: _____

Signature of Parent/Guardian/Music Teacher (competitors under 18) _____

It is the responsibility of the contestant to know when they perform. Please pick up a copy of the Music Festival Program (available in mid April) or contact the following Festival Committee member:

Anne McLeod: dave.phc@pei.sympatico.ca

PLEASE NOTE: Photocopied music will not be accepted in any public place at this festival.

Please send entries to: **Anne McLeod, 5750 TCH, Lower Newtown, Vernon Bridge, R.R.2, PEI. COA 2E0**