

## Competitor Information

**Entry Deadline:**  
**February 10, 2017**

Please fill out only one Competitor Information form, and as many Class Entry Forms as you need. Please indicate below if you are preparing for an exam and if you are willing and able to attend a Music Camp should you win a Camp Scholarship. Only those who indicate "yes" will be eligible for these scholarships. **On-line entries may be made at [www.mforganizer.ca/quillplains](http://www.mforganizer.ca/quillplains).** Make fees payable to the Quill Plains Music Festival Association. **Return completed forms and fees to Box 54 Foam Lake, SK S0A 1A0** on or before the entry deadline.

### Please print CLEARLY

**Name of Competitor as it is to appear in the program.**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: (as of December 31, 2016) \_\_\_\_\_

Preparing for Exam? \_\_\_\_\_ Camp Scholarship? \_\_\_\_\_

Parent's Names: \_\_\_\_\_

Phone #: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

Is this your first year of entering a district festival? Yes No

Entrant is Aboriginal or a newcomer to Canada in the past five years Yes No

### Teacher/Conductor Information

Name: \_\_\_\_\_ Instrument: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone #'s: Home/Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Instrument: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone #'s: Home/Cell: \_\_\_\_\_

### Accompanist Information

Name: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone #'s: Home/Cell: \_\_\_\_\_

*Solos: \$10, Duets: \$15, Ensembles: (3 - 6 performers): \$20, School Groups/Bands/Choirs: \$25*  
Individual Maximum: \$50, School Maximum: \$75, Family Maximum \$100

**Total Fees Paid:** \_\_\_\_\_ Cash/Cheque/On-line Date: \_\_\_\_\_

SPECIAL REQUESTS: Every effort will be made to meet scheduling needs of the participants but we can't make guarantees that your request will be met at this year's festival.

\_\_\_\_\_  
\_\_\_\_\_

Competitors Name:
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## Class Entries

Please fill out only one Competitor Information form, and as many Class Entry Forms as you need. **Return completed forms** (with the completed Competitor Information form on top) **and fees to Box 54 Foam Lake, SK S0A 1A0** on or before the entry deadline.

Give the complete name of the selection to be performed. If appropriate, please include Opus, Movement, Number and/or Work the piece is from. When entering a Broadway or Musical Theatre class, give the name of the show as well as the composer. When entering an opera or oratorio class, give the name of the opera or oratorio and the name of the composer. Under "Length of Piece", round your performance time up to the closest minute. **Solo fees are \$10, Duet fees are \$15, Ensemble fees (3-6 performers) are \$20, School Groups/Bands/Choirs fees are \$25. Individual Maximum fees are \$50, School Maximum fees are \$75 and Family Maximum fees are \$100.**

Class Number	Class Name	Your Accompanist	Fee
Title of Selection to be played (in full)		Composer (first and last name)	Length of Piece

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I, the undersigned, certify that all conditions governing this entry will be compiled with, and that I have not performed my selections in the 2016 Saskatchewan Music Festival (unless excepted)

**Competitor's Signature** \_\_\_\_\_