

DISTRICT FESTIVAL ENTRY FORM

Important:

- 1. The current SMFA Syllabus, Regulations, Scholarship Information, dates and contacts for each District Festival, and other important information concerning the Festival(s) you wish to enter, can be found on our website at: www.smfa.ca.
- 2. Use a separate entry form for each class entered.
- 3. Send completed entry form(s) with payment to the Entry Secretary/Administrator of the District Festival you enter, on or before the entry close date. Check the District Festival page on the SMFA website for applicable fees.
- 4. Make cheques payable, or send e-transfers where applicable, to the District Festival you are entering.

Noteworthy Regulations:

- 1. All competitors must supply an **original score or authorized copy** for the adjudicator. Please number the first bar of each line (music scores), and each fifth line (Spoken Word selections).
- 2. Refer to the SMFA Website for each District Festival's Scholarship and Awards criteria.
- 3. To qualify as a **District Winner to the Provincial Finals Competition** each individual named on the entry form must have entered and competed in at least two **solo** classes in the same discipline. **Musical Theatre and Voice are separate disciplines.**
- 4. Competitors are required to represent the District Festival where they received their first recommendation.
- 5. Memory work is encouraged in District Festivals and is mandatory at the Provincial level, with the exception of the Choral, Brass, Woodwind, and Percussion Classes, and the pianist in Lieder Class. Memory work is mandatory in all levels of Canada West competitions, with the exception of Chamber and Choral classes.





NAME OF COMPETITOR TO APPEAR IN PROGRAM			
Last name		n name & ouns (she/her)	
Mailing Address			$\neg \neg \neg$
Street/Box #		City/Town & Province	Postal Code
Age (as of Dec. 31 of previous year)	E-r	nail	
DUET/ TRIO/ QUARTET/ OTHER ENSEMBLE CLASSES Group Name			
Group Name	Cor	ntact Name/Conductor	
Email or Telephone		Number of Performers in Group	
Mailing Address			
Street/Box	City/	Fown & Province	Postal Code
Names & Ages of 1 Duet/Trio/Quartet members 2			
2			
			_
For small ensemble classes the form must be signed by one person	on only, to whom all co	mmunications will be addressed.	
TEACHER INFORMATION	_		
Name	Email or	Telephone	
Address			
71881.555			
	our first year of antonin	g a district music faction 2	No.
CLASS INFORMATION Is this yo	our first year of entering	g a district music festival? Yes	No [
CLASS INFORMATION Is this year Class # Class title		g a district music festival? Yes	No
CLASS INFORMATION Is this you Class # Class title Title (include the work the selection is from, movement, opus movement)		g a district music festival? Yes	No
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MEDIA RELEASE FORM *** PLEASE READ CAREFULLY ***

This authorization grants permission to use your image (still or moving) and/or your performance in perpetuity for educational/promotional purposes.

I agree to the following, for educational/promotional purposes:

- 1. To allow the recording of your image/voice (e.g., photographs, audio, or video)
- 2. To allow distribution of images or recordings
- 3. That there is no reimbursement for the right to take, use, or distribute images or recordings

By signing below, I and/or my child(ren) acknowledge that we have carefully read this agreement and understand its contents; that we have been sufficiently informed of the risks involved and give our voluntary consent in signing it as my own free act and deed, free from any inducement, with the full intention to be bound.

Name of Student(s)
Signature of Student (over 18) or Signature of Parent/Guardian on behalf of minor
Date
Print Name of Student (over 18) or Parent/Guardian on behalf of minor