



DANCES FOR PIANO FESTIVAL 2017
AUDITION FORM FOR CHAMBER AND ENSEMBLE WORKS

NAME OF PARTICIPANT: _____
AGE: _____ BIRTHDATE: _____
ADDRESS: _____
EMAIL ADDRESS: _____
CONTACT NUMBERS: _____

UPLOAD 2x2 ID PICTURE
<https://goo.gl/forms/esjK4YFXf1JdGhk13> or
E-mail us at
dancesforpiano@gmail.com
Use your full name as the file name and subject of the e-mail.

NAME OF PARTICIPANT'S CURRENT PIANO TEACHER: _____
EMAIL ADDRESS: _____ CONTACT NUMBERS: _____

REPERTOIRE LIST: (performance time limit is 5 mins.)

COMPOSER/ARRANGER	FULL TITLE (Indicate key, opus, movement if applicable)	DURATION

ADDITIONAL INFORMATION (please indicate details of partner/partners)

NAME, AGE, TEACHER'S NAME	PART / INSTRUMENT

PREFERRED PERFORMANCE SLOT: (to be filled up only by the TEACHER of the participant)

CHOICE NO.1 (Encircle your FIRST CHOICE)	CHOICE NO.2 (Encircle your SECOND CHOICE)
December 10, 2017 AM - 8am 10am PM - 1pm 3pm	December 17, 2017 AM - 8am 10am PM - 1pm 3pm
December 10, 2017 AM - 8am 10am PM - 1pm 3pm	December 17, 2017 AM - 8am 10am PM - 1pm 3pm

We understand that the Festival Committee shall try to accommodate us to our desired choice sequence. We also understand that our desired choice sequence do not automatically mean that these will be granted by the Festival Committee since other equally important factors have to be considered in the scheduling of performances.

Signature of PARTICIPANT Signature of PIANO TEACHER Name & Signature of Parent/Guardian (if applicant is a minor)

COMMENTS and SUGGESTIONS: (For PTGP Audition Panel Only)

Signature of Audition Panel Member