

**NEBRASKA MUSIC TEACHERS ASSOCIATION
NEBRASKA COLLEGIATE COMPETITION**

ENTRY BLANK

ENTRY POSTMARK DATE: September 9, 2008
STATE COMPETITION DATE: Saturday, October 18, 2008
STATE COMPETITION FEE: \$25.00 for each solo and/or ensemble entry
STATE COMPETITION LOCATION: Nebraska Wesleyan University, Lincoln
STATE COMPETITION CHAIR: Lisa Albee, 1623 Lariat Lane, Grand Island, NE 68803
 308-381-8060 lbalbee@msn.com

Fill in all blanks (please type or print). **Teachers please make one check payable to Nebraska Music Teachers Association to cover the total fees for all students entering the Competition.** Send entry blanks and one check to the State Chair no later than the entry postmark deadline.

STUDENT'S NAME _____ **TELEPHONE ()** _____

ADDRESS _____
Number & Street City State Zip

E-MAIL _____ **PERFORMANCE FIELD** _____
Specify piano, violin, voice, ensemble, etc.

YEAR IN SCHOOL (fresh., soph., etc.) _____ **DATE OF BIRTH** _____

LENGTH OF STUDY WITH PRESENT TEACHER _____ (yrs./mos.) **TOTAL STUDY** _____ (yrs./mos.)

Are you entering more than one performance field? _____

REPERTOIRE: Refer to NMTA revised 2005 Student Festival and Competition Manual, "American Music Teacher" (Apr./May issue), or www.mtna.org website for information on requirements.

<u>TITLE</u>	<u>OP. #, K. #, BWV #</u>	<u>COMPOSER</u>	<u>KEY</u>	<u>PERIOD</u>

Total Performance Time: _____ minutes

ACCOMPANIST'S NAME (if applicable) _____

COMPETITION SCHEDULE: Competition times will be assigned by the State Chair. Please circle the time preferred. Preferences will be honored only if space and time permit.

Saturday A.M. **Saturday P.M.**

TEACHER'S NAME _____ **TELEPHONE()** _____

TEACHER'S ADDRESS _____
Number & Street City State Zip

E-MAIL _____ **TEACHER'S MTNA (National) MEMBERSHIP #** _____

"I AGREE TO ACCEPT THE JUDGE'S DECISION AS FINAL AND WITHOUT QUESTION."

STUDENT'S SIGNATURE _____

TEACHER'S SIGNATURE _____