

OhioMTA Southwest 2019 Masquerade Musicale
Saturday and Sunday, October 26 and 27
Barnes and Noble West Chester – 9455 Civic Center Blvd.
Postmark Deadline for receipt of applications is **October 7**

Instrumental and vocal students grades K-12 are invited to participate. This is a great time to show off Halloween costumes! If not registering online, please complete this form and return with entry fee of \$15 per student, or \$20 for non-members. Non-profit organizations such as Melodic Connections and My Cincinnati may send up to 10 students at no cost. **Fees are non-refundable.** It is suggested that teachers copy registration forms before mailing. Any student who requires accompaniment should bring an accompanist.

Students are to prepare piece(s) (memorization optional – no illegal copies, please) lasting no longer than 3 minutes total. Ensemble numbers count as one entry. Recitals will take place hourly, with up to 25 students in each (no more than 30 minutes' playing time). Each performer receives a treat after playing. Scheduling is on a first-come, first-served basis, so register early for your preferred time slot! Teachers will be notified of students' performance times about one week before the event. It is preferred that teachers be available to introduce their own students.

Notifications will be sent by e-mail. If you prefer to be contacted by telephone, please check here_____.

For scheduling questions, contact amy@cincinnatiacademicademy.com. For all other questions, contact tgranick@fuse.net

Teacher's Name _____ Phone _____ Alternate Phone_____

Email _____

Payment information:

Total Included: \$15 x number of students _____ \$ _____
\$20 x number of students _____ \$ _____ Non-OMTA members
Number of students from non-profit organizations _____

If registering by mail, please include one check for all of your students (made out to OhioMTA Southwest) for total to:

Amy Immerman
6911 Pfeiffer Road
Cincinnati, OH 45242

Teachers, please photocopy this page and have each of your students' parents/guardians sign and date this form. Return the signed form at the event.

By registering and participating in this event, I allow the administrators of Masquerade Musicale and their affiliate organizations to capture and use photos, videos, and recordings related to Masquerade Musicale only for purposes related to future activities of Masquerade Musicale and their affiliate organizations.

Print Parent/Guardian Name _____ ***Date*** ____/____/____

Sign Parent/Guardian Name _____

I do ____/ ***do not*** ____ ***consent to this agreement (please check one.)***

Child(ren)'s Name(s) _____
Please Print

