

Registration Form: CSMTA Contemporary Showcase

Mail the application to David Westfall, 1 Ravine Avenue, Middletown, CT 06457 with \$10 fee (non-refundable) payable to CSMTA, postmarked by March 3. Questions? Call David Westfall @ 860.347.4189 or email westfall@hartford.edu.

Please include the complete name of the composer and title of the selection, along with opus number. If part of a collection or suite, please include its name.

Student information:

Entrant _____

Phone _____ School Grade _____ Age _____

Teacher information:

Teacher _____ Phone _____

Email _____

Address _____

_____ Zip Code _____
(City) (State, if other than CT)

1. Composition _____

Composer _____ Timing _____

2. Composition _____

Composer _____ Timing _____

Please check the appropriate contribution toward the *MTNA Hurricane Katrina Recovery Fund*.

_____ **Student contribution** I wish to donate the following amount: _____

_____ **Teacher contribution** I wish to donate the following amount: _____

(Check should be made payable to CSMTA, writing "MTNA Katrina Fund" on the memo line of the check.)