

Satori Strings Contest Solo Entry Form

Satori Certificate of Musicianship 67 E. Floral Ave. Arcadia, CA 91006 Tel: (626)446-4638 Fax: (626)446-0698

Email: satoristrings@live.com

Applicant's Info.				
Last Name:		First Name:	Date of Birtl	n:
Address:				
			Zip Code	e:
		Cell Phone:	Emai	
School: Teacher's Info.			Emai	ll:
Last Name		First Name:		
			Years of Study:	
Instrument: (please c	heck one)			
	☐ Violin ☐ String Duet	☐ Viola☐ String Quartet	☐ Cello ☐ String / Piano Trio	☐ String Bass ☐ Piano Quartet/Quintet
	Other:			
Entry Categories: See Satori String Contest	Rules for specific guidel	ines. Age and instrument pla	cement will be determined by th	e information provided above.
☐ Prodigy Solo	\square Open Solo	☐ Qualified Solo	\square Jr. Qualified	\square Entry Qualified
\square Prodigy American	\square Open American	\square Qualified American	\square Jr. Qualified American	☐ Entry Qualified American
\square Prodigy Baroque	\square Open Baroque	\square Qualified Baroque	\square Jr. Qualified Baroque	☐ Entry Qualified Baroque
\square Prodigy Concerto				
_			.net/content/contest-categor	<u>ies)</u>
Entry Fee:				
Prodigy =				
Open = \$	55 /Junior = \$45			
Total Entry Fee Enclos	ed = \$			
Signature:			Date:	