

# sarasota music festival™

a program of the sarasota orchestra

709 North Tamiami Trail, Sarasota, FL 34236 TEL: 941-487-2730 FAX: 941-953-3059  
EMAIL: rmccabe@sarasotaorchestra.org WEBSITE: www.sarasotaorchestra.org

**Application, fee, and audition recording must be postmarked by February 1, 2010.**

ARRIVAL day is Sunday, May 30, 2010. DEPARTURE day is Sunday, June 20, 2010.

PLEASE TYPE and MAIL your application.

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ NICKNAME \_\_\_\_\_

GENDER \_\_\_\_\_ BIRTHDAY MO \_\_\_\_ DAY \_\_\_\_ YR \_\_\_\_\_ INSTRUMENT \_\_\_\_\_

Note: E-mail is the preferred method of communication. Your audition results and other important information will be sent via e-mail. You will receive an e-mail confirming that your application has been received. Please check your spam folder or call our office if you do not receive this e-mail within 2 weeks of your CD/application being mailed. Your permanent address will be filed in our alumni database.

PERMANENT ADDRESS \_\_\_\_\_ [ ] School [ ] Home

CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_ TEL \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

E-MAIL \_\_\_\_\_ CELL PHONE \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

NATIONALITY (OPTIONAL) \_\_\_\_\_ Nationality refers to your country of birth and assists us in compiling accurate demographics of our participants.

NAME as you would like it printed in the program \_\_\_\_\_

HOMETOWN as you would like it printed in the program \_\_\_\_\_

SCHOOL or EMPLOYER \_\_\_\_\_

This information will be used for printed programs. If this is left blank you will be listed in the Program Book as "freelance".

We provide each participant with a Festival T-shirt. Please indicate your size:

[ ] Extra Small [ ] Small [ ] Medium [ ] Large [ ] Extra Large

**AUDITION RECORDING** – All applicants must submit a CD recording. Audition recordings (unedited CD) are reviewed by faculty artists. Applicants will be notified by e-mail of status in mid to late March.

Please review your recording before sending to ensure that it plays on a standard CD player.

**FEE – A COMPLETE Application includes this form, recording, and fee. If all materials are not postmarked by 2/1/10, the late fee will apply.**

Fees may be paid by check, money order, or credit card. Fees paid by credit card must include card number, expiration date, 3-digit security code and billing address. Returned checks or unapproved credit cards will incur a processing fee. All checks and money orders must be in U.S. currency.

Application Fee enclosed: [ ] \$55 (on or before 2/1/10) [ ] \$75 (after 2/1/10)

[ ] with my signature below, I hereby request and authorize the Sarasota Music Festival to charge the fee due to my:

[ ] VISA, [ ] MC, [ ] AmEx, [ ] Discover

CHARGE CARD # \_\_\_\_\_ EXP DATE \_\_\_\_/\_\_\_\_/\_\_\_\_ 3-Digit Code \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

**ATTENDANCE** – All Participants are REQUIRED to be in attendance for the full three weeks of the Festival.

Please initial this box [ ] indicating your intent, if accepted, to attend for the full three weeks. ARRIVAL day is Sunday, May 30, 2010. DEPARTURE day is Sunday, June 20, 2010.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

**Send APPLICATION, RECORDING, AND APPLICATION FEE to:**  
Sarasota Music Festival, 709 N. Tamiami Trail, Sarasota, FL 34236 USA

NAME \_\_\_\_\_ INSTRUMENT \_\_\_\_\_

Major Instrumental TEACHERS:

Dates of Study:

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Chamber Music TEACHERS/COACHES:

Dates of Study:

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ORCHESTRAL EXPERIENCE (School and/or professional):

Dates:

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REPRESENTATIVE REPERTOIRE (past two years)

SOLO Repertoire:

Performed in public:

YES

NO

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CHAMBER Repertoire:

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COMMENTS:

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