

The Chaminade Music Club of Yonkers



APPLICATION FOR 2025 CHAMINADE'S MUSIC SCHOLARSHIP AWARDS

NAME OF APPLICANT _____

HOME ADDRESS _____
Street city state zip code

(Applicant must be a resident of Westchester Co. or sponsored by a Chaminade Club member)

PHONE: Home _____ Cell Phone _____ Email _____

AGE _____ JUNIOR/SENIOR AT _____ HIGH SCHOOL

PARENT'S NAME _____

SPONSOR'S NAME (if applicable) _____

NAME OF INSTRUMENT or TYPE OF VOICE _____

NAME OF ACCOMPANIST _____

PIECES PERFORMED: _____

(All Applicants, except pianists, should have an accompaniment, either live person, or may use a taped accompaniment, but must provide all equipment required for playing the accompaniment.)

Name, Telephone Number of private music teacher (if applicable)

Application is downloadable from the website www.chaminademusic.org (select scholarship) and e-mail filled in application to chaminade9@optonline.net by Tuesday APRIL 9, 2025

OR

Return this application by regular snail mail, Postmarked Deadline Friday APRIL 9, 2025 to:

**Chaminade Music Club
c/o Marcia Klein
15 Round A Bend Road
Tarrytown, NY 10591**

This application may be duplicated