



# CBMC Summer Camp Scholarship Application

**DEADLINE:**

**Application and mp3 or dvd must be RECEIVED by THE CBMC by March 15, 2020**

Applicant's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_ Home Phone: (    ) \_\_\_\_\_ Cell: (    ) \_\_\_\_\_

Middle/High School attended: \_\_\_\_\_

Instrument: \_\_\_\_\_ Current Grade in School: \_\_\_\_\_

Teacher: \_\_\_\_\_ Total # years of lessons: \_\_\_\_\_ # years with present teacher: \_\_\_\_\_

Teacher email: \_\_\_\_\_ Work Phone (    ) \_\_\_\_\_ Cell: \_\_\_\_\_

**Teacher's Signature:**



**acknowledging that applicant has been their student for at least 6 months:**

Parent's or Guardian's Name: \_\_\_\_\_ email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

## List Compositions performed on the audition recording:

- Include title (Opus, Mvt.), composer (full name), and length of time for the performance. If the title is a foreign language give the English translation. If it is from an Opera give the name of the Opera.
- Choose pieces from 2 of the 4 musical periods (Baroque, Classical, Romantic or Contemporary).
- Record performance with **LIVE accompaniment** in either dvd or mp3 format, burn onto disk for submission.

1. \_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_

**List music activities, performances, awards received through music organizations (ie: Festival, Guild, Contests)**

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**CBMC Summer Camp Scholarship Application (page 2 of 2)**

List music activities and awards received at your school:

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List music activities and awards received in the community or your church:

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List your plans for the future: \_\_\_\_\_

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What Music Camp do you plan to attend: \_\_\_\_\_

What is the Cost of the Camp Registration: \_\_\_\_\_

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**Mail this application and mp3 or dvd to:**

**Karen LeGrand, 25 Ridgelake Drive, Mary Esther, 32569-1659**

**(850) 855-0688 KLegrandpiano@cox.net**

**www.ChoctawBayMusicClub.org**