



MCoFM Musical Theatre Competition 2018-2019

APPLICATION

Application submission deadline: January 31, 2019

Mail or bring your application packet to:

Miami Conservatory of Music
2911 Grand Avenue
Suite 400A
Miami, FL 33133

or email to:
info@mcofm.org

Your application packet must include:

1. Application filled out and signed
2. Non-refundable application fee of \$25 (check payable to Miami Conservatory of Music or payment online at www.miamiconservatoryofmusic.com)
3. A jpg color photo (headshot to email to info@mcofm.org)

Contestant Information

Personal Contact Information

First Name _____ Middle Name _____ Last Name _____

Date of birth _____

Street address _____ City _____ State _____ Postal code _____

Home Phone _____ Email _____

Current school _____ Grade _____ Years of Music Instruction _____

Parent/Guardian Information

First Name _____ Last Name _____

Cell phone _____ Email _____

If different from the contestant information

Street address _____ City _____ State _____ Postal code _____

Current Music Teacher

First Name _____ Last Name _____

Performance Information

Song 1

Composer _____ Title/Show _____ Length _____

Song 2

Composer _____ Title/Show _____ Length _____

- **1 original score of the movement to be performed must be provided by the contestant for the judges' use.**

2911 grand avenue suite 400A miami, florida 33133 tel: (305)442-2283 fax: (305)442-3383
email: info@mcofm.org www.miamiconservatoryofmusic.com



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- I understand that audio recordings, video recordings and photographs may be made during the competition and final performance for promotional and informational purposes.
- I understand that my child must attend all rehearsals to be arranged if he/she wins the first prize.

Parent/Guardian Signature _____

Date _____

Print Name _____