## QUINCY SYMPHONY ORCHESTRA ASSOCIATION 68th ANNUAL MARTHA McCRORY YOUNG ARTISTS COMPETITION APPLICATION FORM

FIRM Postmark Deadline for Application: Friday, November 18, 2022 (Application will not be accepted or considered valid without <u>all</u> required signatures and fee.)

Audition Date: Sat. December 17, 2022, 10am-3pm, First Union Congregational Church <u>CONCERT DATE: Sunday, February 19, 2023 at 3:00pm</u> <u>MANDATORY Dress Rehearsal: Saturday, February 18, 2023 1:00pm-3:30pm</u>

This competition is open to youth in 10<sup>th</sup>-12<sup>th</sup> grades in school within 75 miles of 1026 Maine St.

Non-Returnable Audition Fee - \$30.00 – Please include with this form. This form is 3 pages.

MUSICIAN NAME	AGE	_HOME PHONE			
ADDRESS	_CITY	STATE	ZIP		
PARENT CELL	PARENT EMAIL				
	STUDENT EMAIL				
FOR INSTRUMENTALISTS ONLY:					
Musical instrument	How long studied				
FOR VOCALISTS ONLY:		=======================================			
Voice range How Ion					
REQUIRED SIGNATURES:					
A. Parent Name (print)		Phone			
Parent Signature	Address				
B. Private Teacher Signature		Phone			
or High School Music Dir. Signature			Phone		
C. School Principal Signature		Ph	one		
School Principal sign, verifying stud	ent class as of C	ctober 1, 2022 (C	Fircle one): 10 11 12		
School	School Address				
City	State _	Zip	)		

~ OVER PLEASE ~

## TO BE COMPLETED BY ALL APPLICANTS:

List instructors y	ou have studied	with or played for recently (for in	nstance, at college auditions)			
List musical organizations in which you have performed recently						
List contests, fes	tivals or worksho	ops you have attended recently_				
REPERTOIRE TO	O BE PERFORN <u>TITLE</u>	1ED <u>Mvmt.</u>	Total performance time with accompaniment (MAX 15 Min)			

**<u>ACCOMPANIMENT</u>**: Orchestra accompaniment must be available to rent or purchase. Applicant is responsible for locating the orchestration source. Places to look:

www.lucksmusic.com www.boosey.com www.alfred.com/edwin-f-kalmus/b/ www.wisemusicclassical.com/

Call the Symphony Office 217-222-2856 for help if you can't find the source for orchestra parts.

ORCHESTRA PARTS RENTED OR SOLD BY:\_\_\_\_

Mail or bring signed application, all three pages, along with \$30.00 audition fee, to Quincy Symphony Orchestra Association, 1026 Maine St., Quincy, IL 62301

Postmark Deadline for Application and Fee: Friday, November 18, 2022

Application must be postmarked by 11/18/2022 or hand delivered by 1 pm 11/21/2022. Do NOT wait until the last minute. All signatures and fee are required by the deadline.

Non-Returnable Audition Fee - \$30.00 - Must be included with this form



## Please place Applicant & Parent initials by each release and sign the bottom of the form where indicated.

\_\_\_\_\_\_**Talent Release:** I assign and grant to the Quincy Symphony Orchestra Association (QSOA) the right and permission to use and publish the photographs/film/videos/electronic representations and/or sound recordings made of me and/or my child by the QSOA or its authorized representatives, and I hereby release the QSOA and its authorized representatives from any and all liability from such use and publication. I hereby authorize the reproduction, sale, copyright, exhibit, broadcast, web posting, electronic storage, and/or distribution of said photographs/film/videos/electronic representations and/or sound recordings without limitation at the discretion of the QSOA. I specifically waive any right to compensation I may have for any of the foregoing.

**\_\_\_\_\_\_Release and Indemnification:** I recognize that there are risks involved in participating in this activity and hereby assume all risk of illness, harm, damage, or death in connection with participation. I understand and agree that neither the Quincy Symphony Orchestra Association (QSOA) nor its trustees, officers, directors, employees, agents or representatives may be held liable in any way for any illness, harm, damage, or death that may occur as a result of my or my child's participation in this activity and hereby agree to save and hold harmless the QSOA, its trustees, officers, directors, employees, agents and representatives from any claim by myself, my estate, heirs, successors, assigns or other persons arising out of participation in the activity. I authorize the QSOA through its trustees, officers, directors, employees, agents or representatives to render or obtain emergency medical care or treatment as may be necessary should any injury, harm or accident occur to me or my child while participating in this activity. I further agree to defend and indemnify the QSOA for all claims, damages, losses, or expenses, including attorneys' fees, concerning an injury, illness, or death to me, my child, or my household members as a result of the COVID-19 pandemic.

**\_\_\_\_\_Facecoverings:** I agree to wear a face covering and that my child and all family members or others who accompany my child to the audition, rehearsals or performance will wear a face covering at all times if required by the venue or instructed by the director.

\_\_\_\_\_Illness: I agree that I and/or my child will not attend the audition, a rehearsal or performance if not feeling well or if exhibiting symptoms of illness or COVID-19 (fever, coughing, runny nose, body aches, dizziness, loss of taste or smell).

Applicant Signature	 Date
Parent Signature	 Date