

**METAIRIE MUSIC CLUB
2019 VOCAL COMPETITION APPLICATION**

Student's Name _____

Student or Parent E-Mail _____

Student or Parent Phone Number _____

Division (Check One): Middle School _____ High School _____

Age _____ Grade _____ Years of Study _____

Teacher's Name _____

Teacher's E-Mail _____

Name of Junior Club: _____

REPERTOIRE TO BE PERFORMED

Title of Piece _____ **Title of Show (MT only)** _____ **Name of Composer**

1) _____

2) _____

3) _____

Please submit this form with a check for \$10.00 payable to Metairie Music Club.

NO CHANGES MAY BE MADE TO REPERTOIRE SELECTIONS AFTER APPLICATION IS SUBMITTED