

METAIRIE MUSIC CLUB
2025 VOICE COMPETITION APPLICATION

Name of Student _____

Student or Parent Email _____

Student or Parent Phone _____

Division (Check One) Middle School _____ High School _____

Age _____ Grade _____ Years of Study _____

Name of Teacher _____

Teacher Email _____

Name of Junior Club _____

REPERTOIRE TO BE PERFORMED

<u>Title of Piece</u>	<u>Title of Larger Work or Show</u>	<u>Composer</u>
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1. _____

2. _____

3. _____

Please submit this form with a check for \$25.00 payable to Metairie Music Club. Send to: Bonnie Knowles, Chair at 101 Homestead Avenue, Metairie, LA 70005 by March 21.

NO CHANGES MAY BE MADE TO REPERTOIRE SELECTIONS AFTER APPLICATION HAS BEEN SUBMITTED

