



**Honors Recital Entry Form**

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Instrument or Voice \_\_\_\_\_

Age \_\_\_\_\_ Grade in School \_\_\_\_\_

School (if applicable) \_\_\_\_\_

Years of study \_\_\_\_\_ Composition Length \_\_\_\_\_ (minutes & seconds)

Composition title \_\_\_\_\_

Composer \_\_\_\_\_

Name of Accompanist (if applicable) \_\_\_\_\_

Music Teacher's name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Music Teacher's Signature \_\_\_\_\_

EIU Music Camp Scholarship Preference (students - 6<sup>th</sup> through 12<sup>th</sup> grades)

(Junior Band) (Senior Band) (Piano) (String) (Choral) (Musical Theatre) (Jazz) (Other \_\_\_\_\_)  
(Circle one)

**Return to:** Elizabeth S. Halbe 2206 4<sup>th</sup> St., Charleston, IL 61920 By **March 18<sup>th</sup>, 2020**

**Include \$20 fee** payable to the Coles County Arts Council, memo: Honors Recital. Fee will be returned if audition cannot be scheduled.

I \_\_\_\_\_, the Parent or Guardian of \_\_\_\_\_ give permission for the use of photos in the newspaper, publications and on the website of the Coles County Arts Council.