



**SUMMER YOUTH MUSIC CAMP
APPLICATION FORM**

Date: _____

Student's name _____

Instrument _____ Years studied _____

Age _____

Parent's name _____

Address _____

City, State, Zip _____

Phone (evening) (____) _____ Phone (day) (____) _____

Email _____

Music teacher's name _____

Music teacher's phone _____

Overnight (boarding) ____ or day (commuting) ____ student?

Audition Pieces

Composer Title

1. _____

2. _____

On a separate piece of paper, please list any honors or awards you have received. Please also list your solo and ensemble (if any) repertoire from the past two years, and indicate any repertoire you are interesting in working on at the Camp. Then send it along with this form and the audition tape by May 14 to:

Dr. Michael Schmitz
NDNU Music Department
1500 Ralston Ave.
Belmont, CA 94002-1997
Phone: (650) 508-3597
fax: (650) 508-3736