THE ROCHESTER SYMPHONY YOUNG ARTIST COMPETITION
Application for Competition

Name_____Phone_____
(Please print clearly)

Address_____
(Street) (city/state) (zip)

Date of Birth_____Instrument _____

Graduation Year_____School_____

Selection to be performed_____

Movement:_____ Opus #_____

Composer_____

Orchestration available from_____
(Please give library name.)

Signature of
Contestant_____Email_____
* *

I, _____recommend
(please print name and position)

_____for application to the Rochester

Symphony Young Artist Competition. He/She is an accomplished musician qualified to participate in a competition oriented toward professional standards.

Signed_____Date_____

Applications must be received by January 10, 2012 in order to be eligible.
Applicants will be called **after** January 10, in the order received, and assigned an audition time.
Auditions will take place on January 21, 2012.
Questions: 248-652-9154 or email: ritamay19@sbcglobal.net

Please return this form with $20.00 application fee. (make check to Rochester Symphony) Send to:
RSO Young Artist Competition c/o Rita J. May
5955 Cobb Creek Road,
Rochester, MI 48306