

ALABAMA MUSIC TEACHER'S ASSOCIATION
STATE AUDITIONS APPLICATION
2018

Send to the appropriate chairman for each audition by the application deadline (see AMTA *SoundBoard*): **Two** copies of this application, and for each student listed below, **one** completed Audition Form. The winner's recital choice piece must be marked before your students can be scheduled. Complete all forms **IN FULL**. Send a self-addressed stamped envelope (**NO POSTCARDS**) - one application copy will be returned with the audition times. See your AUDITIONS HANDBOOK for all requirements at each Audition Level or check with the Auditions Chairman for additional information. Please **TYPE OR PRINT**. Leave bold or doubled boxes BLANK!

CODE: _____

Teacher's Name _____

Address _____ City _____ State _____ Zip _____

Email Address (es) _____

Telephone _____ AMTA dues paid on: _____ / _____ / _____

Audition Level: Pre-college State District # _____ Location _____
 District City _____

(List Alphabetically by Division) STUDENT'S NAME	T-SHIRT SIZE	DIVISION	AGE	HOMETOWN	CODE	TIMES		GRADE: PERFORMANCE
						FRI	SAT	

Please sign after the following statement: My signature verifies that every student entered here is taught by me:
 Signature: _____

Teacher Registration Totals

Make one check payable to AMTA.

Solo Concerto Total _____ @ \$25.00 = \$ _____

Division I _____ ****All students MUST have his/her own original form of the music he/she performs—no sharing.****

Division II _____

Division III _____

District only:	
Participants Elig. for State	
Division I	_____
Division II	_____
Division III	_____
TOTALS:	_____