



LORRAINE C. LIPPERT YOUNG ARTIST CONCERTO COMPETITION APPLICATION

Applicants: please include this completed and signed form with your submission.

*Date of Application _____

APPLICANT CONTACT INFORMATION

Name		Date of Birth (mm/dd/yyyy)	
Address		Phone	
City	County	State	Zip
Email	Parents' Names		
Address (if different)			
Email	Phone		

EDUCATION INFORMATION

Current School		Grade
School Music Director		Email
Private Music Teacher		Email
Years of Private Study	Additional Ensemble(s)	
Previous Solo Experience		
Awards, Competitions, Workshops, and Summer Programs		

COMPETITION INFORMATION

Instrument		Years Played
Complete Name of Concerto		
Opus Number	Movement Number	Duration (mins)
Full Name of Composer		
Link to Recording (if applicable)		
Accompanist Name (if applicable, for audition)		

SIGNATURE(S)

I certify all information provided on this form is correct to the best of my knowledge. I have read the Rules and Policies of the Lorraine C. Lippert Young Artist Concerto Competition, and I understand all decisions made by the Audition Panel are final.

Applicant Signature _____

Parent/Guardian Signature (if applicant is younger than 18) _____