

AMERICAN STRING TEACHERS ASSOCIATION OF NEW JERSEY
SOLO COMPETITION 2010
APPLICATION AUTHORIZATION FORM

I (name of parent or legal guardian) _____ hereby
authorize

(name of applicant) _____'s application to
participate
in the American String Teachers Association of New Jersey's 2010
Competition.

The competition will judged by a panel of well-known music professionals, who
will listen to cd's which are postmarked by October 15, 2010

Please check the statement(s) apply to you:

I am an ASTA/NJ member: _____

My teacher is an ASTA/NJ member: _____

I am a resident of NJ: _____

Contact information:

Physical
address: _____

Email
address: _____

Telephone
number(s): _____

Student's signature _____ Date

Parent's signature _____ Date

Please send this form to:

Margaret Z. Roberts

39 Trinity Park

Mount Tabor, NJ 07878-0417

ALL APPLICATIONS SHOULD BE POSTMARKED BY OCTOBER 15, 2010.

IMPORTANT REMINDER:

Please be certain to include the following information with this form:

* \$65.00 application fee payable to ASTA/NJ

*proof of age (copy of birth certificate, passport, government issued ID
card, or driver's license)

Be sure to complete the online application also.