

**AMERICAN STRING TEACHER'S ASSOCIATION OF NEW
JERSEY
SOLO COMPETITION 2008**

APPLICATION AUTHORIZATION FORM

I (name of parent or legal guardian) _____ hereby authorize
(name of applicant) _____'s application to participate
in the American String Teacher's Association of New Jersey's Chamber Music Institute
2008 at Kean University.

Please check whichever statement(s) apply to you:

I am an ASTA/NJ with NSOA member _____

My teacher is an ASTA/NJ with NSOA member _____

I am a resident of NJ, or am currently attending school (includes regularly
scheduled private lessons) in NJ _____

Student's signature _____ Date _____

Parent's signature _____ Date _____

Please send this form to:

Dr. Keith Calmes
ASTA / NJ Solo Competition Chair
1770 Belmar Boulevard
Wall, NJ 07719

IMPORTANT REMINDER:

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

- ❖ \$50.00 application fee payable to ASTA / NJ
- ❖ proof of age (copy of birth certificate, passport, government issued ID card, driver's license)

THANK YOU FOR YOUR APPLICATION!