

2008-2009 Georgia ASTA Solo Competition
Application Form (State Round-Sat., Oct. 25, 2008)
Note: student or private teacher must be ASTA member

Name of Applicant _____

Complete Address: _____

E-mail address _____

Daytime Phone # _____ Evening Phone# _____

Date of Birth _____ Instrument _____

Name, Composer and **Length of Required Selection** _____

Name, Composer and **Length of Additional Selections** _____

Accompanist Name _____

Teacher's name, telephone #, e-mail address and **ASTA membership #** _____

Please include **proof of birth date** (copy of birth certificate) and an entrance fee of **\$55.00** payable to Georgia ASTA with this application.

RETURN TO: Dr. Marilyn Seelman, Georgia State University, School of Music, P.O. Box 4097, Atlanta, GA 30302-4097 postmarked by **Wednesday, October 1, 2008**. **The competition will be held in the GSU recital hall on Saturday, October 25, 2008. You will be emailed your audition time after October 1, 2008.**