

TexASTA Young Artists Solo Competition

Date _____

Name _____ (please type or print clearly)

Address _____

City, State, Zip _____ Home Phone _____

Email _____ Cell Phone _____

Instrument _____ Age _____ Birth date _____

Division ___ Junior ___ Senior

Are you a member of ASTA? ___ yes ___ no ASTA ID number _____

Is your teacher a member of ASTA? ___ yes ___ no ASTA ID number _____

Teacher's name _____

Repertoire (on CD recording)

Competition Prizes, Significant Concerts, Festivals, and Honors (5 lines maximum)

Please return the following with your application to the address below. All entries must be received by October 1st, 2020:

- 2 copies of this entry form with proof of birth date (birth certificate, driver's license, etc.)
- Non-refundable entry fee of \$50 payable to TexASTA
- CD recording of required state repertoire

Dr. Jack Unzicker
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at Arlington - Music
Arlington, TX 76019-0105