

BEACON INTERNATIONAL VOCAL COMPETITION APPLICATION FORM



1, Name: _____

2, Please choose the content: Competition: _____ Performance Showcase _____

3, Personal Information:

Age: _____ Date of Birth: _____ Years of studying: _____

Phone #: _____ Email: _____

Address: _____

Instructor: _____ Phone #: _____

4, Choose your age group below:

Lower Division: _____ Upper Division: _____ Advanced Division: _____

5, Please check your group:

Soprano: _____ Mezzo soprano: _____ Alto: _____

Tenor: _____ Baritone: _____ Bass: _____

6, Repertoires:

Piece #1: _____

OP: _____ NO: _____ MVT: _____ Length: _____

Piece #2: _____

OP: _____ NO: _____ MVT: _____ Length: _____

7, Registration Fee:

Competition: \$100 Performance Showcase: \$35 Enclosed Amount: _____

Please payable to: U.S. Beacon Artist Association

Mailing Address: 72 N. 5th Street, San Jose, CA 95112