



P.O. Box 1317, Morristown NJ 07962-1317 • ccc@harmonium.org

Registration Form for 2017 Student Choral Composition Contest (Postmark by Mar. 15, 2017)

PLEASE PRINT LEGIBLY OR TYPE

Student's Name:

Current Grade:

Student's Address, Home Phone (include area code), and Email Address:

Mother's Name:

Mother's Address and Phone (if different from above):

Father's Name:

Father's Address and Phone (if different from above):

Name of School:

School Address and Phone Number (include area code):

Sponsor Name and Title:

Number of Compositions:

How did you hear about our Choral Composition Contest?

After we receive this form, we will send you a unique Identification Number for each composition submitted. This number will be used to identify your manuscript while it is being judged. If you intend to submit more than one composition, please let us know how many so that we may assign a unique number for each one.

I have read and understood the Guidelines for 2017 Student Choral Composition Contest and agree to abide by their terms.

Student's Signature: _____ Date: _____

Parent or Guardian's Signature: _____ Date: _____
(required if student is 17-years-old or younger as of November 4, 2017)

Please return this registration form by Mar. 15, 2017 to:
Harmonium Composition Contest, P.O. Box 1317, Morristown NJ 07962-1317