

44th Annual Fischoff National Chamber Music Competition University of Notre Dame - South Bend, Indiana

Please fill out this form and mail it to: Fischoff, Attn: Miki Strabley, 301 Brownson Hall, Notre Dame IN 46556

2017	Competition Entry Form [®]			
For Office Use – Video Audition Round Fee Age/ID	Fischoff-Assigned Entry Code # Repertoire	_		
I	Ensemble Information			
Ensemble Name:				
City/State:				
School: (if applicable)				
Website:				
Six-digit Video Code #				
Mark the appropriate choices.				
Division: Junior Senior String Se	enior Wind Wind Type: Brass Woodwind _	_Saxophone		
Other:				
Number of members: 3 4 5	6 Does instrumentation include piano? Yes	No		
Contact Person Name:				
E-mail:	<u> </u>			
(Email is the primary means of contact. Please provide	e an accurate address and check email frequently.)			
Phone:	_			
Address:	_			
City:	State: Zip:			
Is this a permanent address, valid after May 14, 2	017? Yes No			
If no, provide a permanent address:				
Contact Person Status: Ensemble Member	Coach Parent Other (specify):			
PayPal Transaction ID:	Date of Payment:			
Payer Name:		Payer Email Address:		

Please provide requested i	ntormation below.				
A) We are interested in perf	forming for a Soiree (see S	Sr. Division rulebook	page 4):	Yes	No
B) We are interested in participating in the PACMan Program (see Jr. Division rulebook page 3):			Yes	No	
C) Our ensemble includes a	t least one member with a	u.S. tax identification	on or social security number:	Yes	No
			g ensemble (or guardian if under of winnings will be withheld for		
D) How did you learn of the Teacher/Coach/Director	Fischoff Competition? (Magazine Ad (specify)	* * * *	Fischoff Poster (w	here?)	
Competition Directory	Previous Entry	Musicians	Web site (specify)		
Other (please specify)					_
, ,	•	-	ease do <i>not</i> confine your comit and will not be made availab		•
If your ensemble has a high Senior Division: (The ensemble	•				
"By checking the box below ensemble member is aware responsibilities implied and	y, I verify that this ensemb of, and will abide by, all of stated with this entry into	ole meets all eligibility competition rules. Ea the competition."	y and entry requirements. I af ch member is informed of, and	d accepts,	
☐ I Agree. Nai	ne:		Date:		
"By checking the box below ensemble members and thei parent/guardian is informed	y, I certify that this ensem r parents/guardians are av	ble meets all eligibilit vare of, and will abide nsibilities implied and	d certify the following statements and entry requirements. I at the by, all competition rules. Eat a stated with this entry into the distance of the distance	ffirm that ach member competit	er and

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Member Information

Note: Parent/Guardian information is required for Junior Division & is respectfully requested for Senior Division (for future reference).

Member 1 - Instrument	E-mail:
Name:	
Address:	Age on 5/14/17
City: State: Zip:	Country of Birth:
Primary Phone:	
Have you previously performed at the Fischoff Competition? Yes	No If yes, what year(s)?
Have you previously won a prize in the Fischoff National Chamber Mu	usic Competition? Yes No
If yes, mark prize: Division: Junior Senior Category:	Wind String Place: Grand First Second Third
Geoffroy	
If yes, indicate the year & name of your ensemble(s):	
Parent/Guardian Names/Address:	
Parent/Guardian Phone: E-mail	:
Member 2 - Instrument	E-mail:
Name:	
Address:	
City: State: Zip:	
Primary Phone:	
Have you previously performed at the Fischoff Competition? Yes	No If yes, what year(s)?
Have you previously won a prize in the Fischoff National Chamber Mu	usic Competition? Yes No
If yes, mark prize: Division: Junior Senior Category: V	Wind String Place: Grand First Second Third
Geoffroy	
If yes, indicate the year & name of your ensemble(s):	
Parent/Guardian Names/Address:	
Parent/Guardian Phone: E-mail	
Member 3 - Instrument	E-mail:
Name:	
Address:	
City: State: Zip:	
Primary Phone:	
Have you previously performed at the Fischoff Competition? Yes	No If yes, what year(s)?
Have you previously won a prize in the Fischoff National Chamber Mu	usic Competition? Yes No
If yes, mark prize: Division: Junior Senior Category: V	Wind String Place: Grand First Second Third
Geoffroy	
If yes, indicate the year & name of your ensemble(s):	
Parent/Guardian Names/Address:	
Parent/Guardian Phone: F-mail	

Member Information continued...

Member 4 - Instrument	E-mail:
Name:	
Address:	Age on 5/14/17
City: State: Zip:	Country of Birth:
Primary Phone:	
Have you previously performed at the Fischoff Competition? Yes	No If yes, what year(s)?
Have you previously won a prize in the Fischoff National Chamber Music	Competition? Yes No
If yes, mark prize: Division: Junior Senior Category: Win	nd String Place: Grand First Second Thir
Geoffroy	
If yes, indicate the year & name of your ensemble(s):	
Parent/Guardian Names/Address:	
Parent/Guardian Phone: E-mail:	
Member 5 - Instrument	E-mail:
Name:	
Address:	
City: State: Zip:	
Primary Phone:	
Have you previously performed at the Fischoff Competition? Yes	No If yes, what year(s)?
Have you previously won a prize in the Fischoff National Chamber Music	
If yes, mark prize: Division: Junior Senior Category: Win	•
Geoffroy	
If yes, indicate the year & name of your ensemble(s):	
Parent/Guardian Names/Address:	
Parent/Guardian Phone: E-mail:	
Member 6 - Instrument	
Name:	
Address:	
City: State: Zip:	Country of Birth:
Primary Phone:	
Have you previously performed at the Fischoff Competition? Yes	No If yes, what year(s)?
Have you previously won a prize in the Fischoff National Chamber Music	•
If yes, mark prize: Division: Junior Senior Category: Win	nd String Place: Grand First Second Thir
Geoffroy	
If yes, indicate the year & name of your ensemble(s):	
Parent/Guardian Names/Address:	
Parent/Guardian Phone: E-mail:	

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Repertoire Form: Video Audition Round

Six-digit Video Code #
Repertoire Requirements: See the Senior & Junior Division rulebooks page 2 for audition requirements.
Contact the Fischoff office by email with any repertoire questions prior to the deadline: Miki@fischoff.org

For each work performed list:

- Title & Composer (including year of birth/death)
 Movements with timings in minutes/seconds
- Total playing time for each work in minutes/seconds

At the end of the entire program, list overall playing time in minutes/seconds.