

CHILLIWACK LIONS CLUB MUSIC & DANCE FESTIVAL
(MusicFest Canada Affiliate)

(download available at www.chilliwacklionsclubmusicanddancefestival.com)

Office Use Only: Class # _____
Office Use Only: Special Requests _____

OFFICIAL ENTRY FORM CHORAL ONLY

CLOSING DATE: Must be received on or before JANUARY 20th, 2020
FESTIVAL DATES: February 26, 2020 / Honours Performance Saturday, April 4, 2020

ENTRY FORMS MAY BE PHOTOCOPIED - 1 FORM PER CLASS ENTRY

“NOW” affiliated with MusicFest Canada
(ensembles chosen by the adjudicators will receive a 2 year invitation to MusicFest Canada)

Choir's Name: _____

School or Church's Name (if applicable): _____

Address: _____ Phone: _____

Grade: _____ (if designated)

Class Number: _____ Non-Competitive: Check here if Non-Competitive Entry

Class Title: _____

TIME LIMIT CHOSEN _____

ENTRY FEE Enclosed (includes conductor, accompanist & for elementary groups over 20 performers,
1 adult escort for every 20 performers): **ENTRY FEE ENCLOSED: \$**

THIS YEAR, A CLINIC OF THE SAME TIME LIMIT WILL FOLLOW EACH GROUP'S PERFORMANCE AND IS INCLUDED IN CLASS FEE.

Title, Composer, &/or arranger: - to be announced at the time of performance.

NUMBER OF PERFORMERS: _____ **NUMBER OF ESCORTS** (see entry fee): _____

OTHER CLASSES ENTERED IN THIS FESTIVAL: _____

Please list ALL classes in which this student is involved performing or accompanying in this discipline or in other disciplines in the CLC Music & Dance Festival. (Every effort is made to avoid conflicts.)

CONDUCTOR'S NAME: _____ Home Phone: _____
Email Please: _____ Work Phone: _____

SIGNATURE OF CONDUCTOR: _____
(Entries will not be accepted without this)

SPECIAL REQUESTS: _____

NO PHOTOCOPIED MUSIC IS ALLOWED
FOR STUDENT, ADJUDICATOR OR ACCOMPANIST

Competitors must provide the Adjudicator with original copies of their music/recitation for all classes and play/sing-offs. Those failing to do so may be disqualified. ANY USE of unauthorized photocopies by any participant, including conductor and accompanist(s), is not acceptable and will result in immediate dismissal and disqualification. When both participant and accompanist require music to play, then you must supply 3 originals. See Syllabus, Page 7, Rule #2

*Please mail entries to Chilliwack Lions Club Music & Dance Festival,
C/O 48185 Ryder Lake Road, Chilliwack, B.C. V4Z 1E3*

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OFFICIAL ENTRY FORM SMALL ENSEMBLES ONLY (Instrument or Vocal)

CLOSING DATE: Must be received on or before DECEMBER 1st, 2019

FESTIVAL DATES: MARCH 3 to MARCH 13, 2020/ Honours Performance Saturday, April 4, 2020

ENTRY FORMS MAY BE PHOTOCOPIED - 1 FORM PER ENSEMBLE ENTRY

ENSEMBLE'S NAME IF AVAILABLE: _____

PARTICIPANT'S NAME (last, first): _____

Birthdate: _____ Age: (Dec.31, 2019) _____ Male or Female (please circle one)

Instrument: _____ (not required for voice)

Address: _____

City: _____ Postal Code: _____

Phone: _____ Email: _____

Parent agrees that participant(s) may be photographed/videoed by media: Yes : No :

Other Participants (last, first)

<u>LAST NAME</u>	<u>GIVEN NAME</u>	<u>DATE OF BIRTH (M/D/Y/)</u>	<u>AGE</u> <small>(as of Dec.31/19)</small>	<u>INSTRUMENT</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Music Division: _____ Class Title : _____

Class Number: _____

Non-Competitive: Check here if Non-Competitive Entry

ENTRY FEE ENCLOSED: \$

Title of Selection: _____

Source: i.e. RCM, 1997, Grade 5; (if not in current RCM syllabus) Source: _____

Composer: _____ **Arranger:** _____

(Give First Initial and Surname of Composer)

(Vocal Ensemble Only) Musical Comedy, Light Opera, Opera, and Oratorio; please list *Title* of main work, from _____

TOTAL PERFORMANCE TIME: Minutes _____ **Seconds** _____

OTHER CLASSES ENTERED IN THIS FESTIVAL AND NAME ACCOMPANIST IF KNOWN:

Please list ALL classes in which this student is involved performing or accompanying in this discipline or in other disciplines in the CLC Music & Dance Festival. (Every effort is made to avoid conflicts.)

TEACHER'S NAME: _____ Home Phone: _____

Email Please: _____ Work Phone: _____

SIGNATURE OF TEACHER: _____

(Entries will not be accepted without this or a cover letter)

SPECIAL REQUESTS: _____

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FOR STUDENT, ADJUDICATOR OR ACCOMPANIST

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