

Sound of Hope International Music Festival

Hope School of Music San Diego Presents 2018 Sound of Hope International Music Festival and Competition at 307 E Carmel St., San Marcos, CA 92078.

Last Name: _____
First Name: _____
Gender: M F _____
First Name: _____
Nationality: _____
Date of Birth (MM/DD/YYYY): _____
Age (As of March 11, 2018): _____
Current Address: _____
Telephone, Mobile phone: _____
Email address: _____
Private Teacher Name/Phone: _____
Division: _____

▼ Please pick one from below and note **(Classical or Christian genre)**

- Solo Piano Prodigy I (age 4-6)
- Solo Piano Prodigy II (7-9)
- Solo Piano Prodigy III (10-12)
- Solo Piano Junior (13-15)
- Solo Piano Senior (16-18) Beginner Division
- Solo String Prodigy I
- Solo String Prodigy II
- Solo String Prodigy III
- Solo String Junior
- Solo String Senior Beginner Division
- Prodigy Ensemble (5-12)
 - Piano Ensemble
 - Piano and String Ensemble
 - String Ensemble
- Young Artist ensemble (13-18)
 - Piano Ensemble
 - Piano and String Ensemble
 - String Ensemble

Program and Time

(List entire program by division include Composer's full name, Name of piece, Number, Key, Movement or Title if applicable):

Applicant agreement: I shall abide by the rules and regulations of the SHIMF Competition, if I accepted as a contestant in the competition. I declare that the information submitted in my application to the competition is complete and truthful. If I receive an award in the competition, I will attend the winner concert. I will give recognition of the award in all future publicity. \$50.00 non-refundable application fee should be made payable to Hope Music Foundation , mailed along with the copy of your birth certificate and this form to 17506 Alva Rd San Diego Ca92127

Parent Signature:
(If applicant is under 18 years old)

Date:

Student Signature:
(If applicant is 18 years old or older)

Date:
