

Section 1 - Parental Release

To be completed by the student and family

Student Name _____ Student Phone _____

Student Email _____

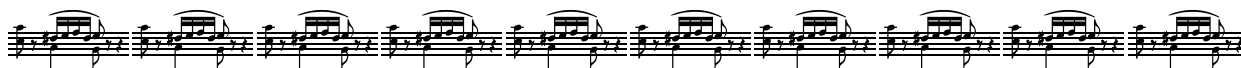
Parent Name _____ Parent Phone _____

Parent Email _____

I agree that each child will be present for a rehearsal, and the entire 2-1/2 hours of the concert.

I also agree to authorize FYP to photograph and/or videotape my child.

Signature of Parent or Legal Guardian _____ Date _____



Section 2 – Teacher Recommendation

Music Teacher Name _____

Circle Student's Performance Level: Advanced Intermediate Beginner

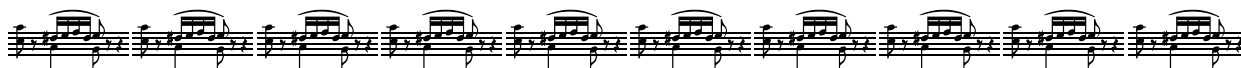
Piece: _____

Composer: _____

Length of Piece: _____ **Not more than 5 minutes.**

Accurate, realistic timing, please. No Liszt Rigoletto Paraphrase, Chopin Polonaise in A Flat, etc.

Signature of Music Teacher _____ Date _____



Please include a non-refundable \$20 Administration Fee. Please make all checks and money orders payable to: The Unitarian Society of Ridgewood – FYP

Send this Form and the Fee to -

Walter Engel Festival of Young Performers

P.O. Box 1471

Ridgewood, NJ 07450

NOTE: An acceptance email will be sent in early March.