



ST. LOUIS AREA
MUSIC TEACHERS ASSOCIATION
HONORS RECITAL FORM

To be used for students receiving a level **1** rating in the district auditions, or for students entering the MTNA competition at the state level.

** This year's recitals will be held on **Saturday, October 14** and **Sunday, October 15, 2006** at Missouri Baptist University.

Please supply all the information requested below for each student eligible to perform on the Honors Recitals. **All forms must be postmarked by September 29, 2006.** You may photocopy as many forms as you wish. Please include **one form for each student: NO EXCEPTIONS, PLEASE!!!**

Mail forms to: Ann Ahrens, 16 Regina Ct., Florissant, MO 63031
For more info, contact Ann: 314-831-6274 aahrens@gatewaycollege.net

Please type or print clearly.

STUDENT'S NAME _____

TITLE OF COMPOSITION	MVT, OPUS, KEY, ETC.	COMPOSER
(one selection only, please)		

AUDITION LEVEL	EXACT TIMING
(MMTA + GRADE, or MTNA + category)	

TEACHER'S NAME	TELEPHONE	E-MAIL
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PLEASE CHECK PREFERRED DATE TO PERFORM:

SATURDAY (Oct. 14) _____ SUNDAY (Oct. 15) _____

Please note: Any special requests for performing time (other siblings, two or more performances involving the student, etc.) must be included directly on the form. We will try to accommodate these requests.