

## **Application for Music in the Mountains, Pa.**

All applicants\* to Music in the Mountains, Pa. are required to complete the following application. **This application, along with a \$35 non-refundable application fee, is due on March 31.<sup>th</sup>**  
Late applications will be considered only in special circumstances.

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

City and State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Cell # (parent) (\_\_\_\_) \_\_\_\_\_

e-mail (student) \_\_\_\_\_ email(Parents) \_\_\_\_\_

Age \_\_\_\_\_ Instrument \_\_\_\_\_

How long have you been playing? \_\_\_\_\_

\_\_\_\_\_

Teacher's name \_\_\_\_\_

Current solo pieces you're studying \_\_\_\_\_

\_\_\_\_\_

If you're a first time applicant, what chamber music experience have you had?

\_\_\_\_\_

\_\_\_\_\_

Have you attended any other music camps? \_\_\_\_\_ If so, which? \_\_\_\_\_

Have you had any theory? \_\_\_\_\_ If so, how many years? \_\_\_\_\_

**\*If you are a first-time applicant, please also enclose a letter of recommendation from your current teacher.**

You may download this application and mail or fax it to:

Music in the Mountains PA  
214 Avon Road  
Narberth, PA 19072-2308  
Fax #: 610-664-3726

For more information, please call Deborah Reeder or Barbara Sonies at 610-664-0346 or e-mail them at: [info@musicinthemountainspa.com](mailto:info@musicinthemountainspa.com).