

The Jean L. Petitt Memorial Music Scholarship Competition for the Cleveland Pops Orchestra Sunday, November 24, 2019 ~ 5:00 to 8:00 p.m.

APPLICATION FORM

Name			Instrument / Vocalist / Dancer	
Home Address				
City	County		Zip Code	
Phone with Area Code	\overline{Age}	Grade and school cur	rently attended	
E-mail address (please be su	re to include, becau	se most communications	will be done by email)	
Instrumental, vocal or dance instructor			Phone with Area Code	
Name of Accompanist			Phone with Area Code	
Selection to be performed			Composer	
Duration of piece	Publish	Publisher of orchestral arrangements		
that govern this competition.	lication must be rec		y read the rules and requirements Pops Orchestra office no later	
Written approval from the		or guardian must be s	ubmitted with this signed	
application form to:	Jean L. Petitt The Clevelar	t Memorial Music Schol nd Pops Orchestra antile Road, Unit 8 Dhio 44122	-	
I am a resident and attend sc participate in the competition Orchestra.			, State of Ohio, and will stablished by The Cleveland Pops	
If declared a scholarship win Severance Hall on a date to l			eland Pops Orchestra at	
	Signature of	Applicant	Date	
	Signature of	Parent or Guardian	 Date	