

**OFFICIAL ENTRY FORM - NEWMARKET VOICE FESTIVAL - 2025**

(This form may be photocopied.)

**ENTRIES MUST BE POSTMARKED NO LATER THAN JANUARY 31, 2025**

Send to: Newmarket Voice Festival, P.O. Box 93105, 1111 Davis Drive, Newmarket, Ontario L3Y 8K3

[www.newmarketvoicefestival.com](http://www.newmarketvoicefestival.com)

PLEASE PRINT CLEARLY

USE ONE FORM PER CLASS ENTRY

(Duets, Ensembles, SUBMIT ONLY ONE FORM)

Performer's Name \_\_\_\_\_

Email \_\_\_\_\_  
Class schedule will be sent to this email address.

Address \_\_\_\_\_

City and Province \_\_\_\_\_

Postal Code \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Date Of Birth (d/m/y) \_\_\_\_\_ Age as of December 31, 2024 \_\_\_\_\_

Teacher \_\_\_\_\_

Email \_\_\_\_\_

Accompanist's Name \_\_\_\_\_

Total Number of Classes Entered \_\_\_\_\_  
(See Syllabus for Codes/Fees)

<u>Class Number</u>	<u>Entry Fee</u>	<u>Title of Piece</u>	<u>Composer</u>	<u>Time</u>
---------------------	------------------	-----------------------	-----------------	-------------

If entry is a duet, trio, or quartet, LIST ALL NAMES AND AGES on the back of this form.

Please send ONE cheque to cover all entries, payable to the "Newmarket Voice Festival".

\*The NVF gratefully accepts donations of \$20 or more and will issue a tax receipt. Our Charitable Registration No. is 87430 6699 RR0001. Please add your donation amount to the total fees submitted.

This entry form must be signed by the performer OR a person authorized to sign on the performer's behalf.

\*\*\*I have read and understand the Rules as stated in the 2024 Syllabus:

Signature of Performer, Parent or Teacher \_\_\_\_\_