



2007 SEMYO Piano Concerto Competition Application

Name: _____ Age: _____

Phone: (____) _____

Address: _____

City: _____ State _____ Zip: _____

E-mail address: _____ Years of Study: _____

High school: _____ Grade in 2007-2008: _____

Private Teacher: _____

Title of piece: _____

Movement: _____ Composer: _____

Second Pianist: _____ Phone: _____

Name and address of local newspaper:

Parent Signature: _____

Teacher Signature: _____

**Applications and \$25 (\$15 SEMYO member) non-refundable fee
payable to SEMYO, date due November 1, 2007.**

Send completed application to: SEMYO
1001 14th St NW Suite 450
Rochester, MN 55901