

PORTLAND INTERNATIONAL PIANO FESTIVAL
PIANOFEST MASTER CLASSES • JULY 17-19, 2009
APPLICATION

Applicant Name _____

Parent(s) Name(s) _____

Address _____

City _____ State _____ Zip _____

Phone (day) _____ (eve) _____

E-mail _____

Age: _____ School: _____

Current piano teacher: _____

Awards, recognition, accomplishments, etc.: _____

Other master classes you have participated in, if any: _____

Anything else you would like us to know about you (*please use back of page or attach a separate page if you like*): _____

Please submit this application form with an audio or video recording of your playing that includes at least 2 pieces that you will be ready to perform in the class, if selected.

AUDIO OR VIDEO REPERTOIRE:

*Indicate pieces you would like to play in the master class with an *.*

Composer	Work
_____	_____
_____	_____
_____	_____

Signed:

Applicant

Teacher

Please return the application form and recording to:
Portland Piano International • PO Box 6469 • Portland, OR 97228
503.228.1388

DEADLINE TO APPLY IS MAY 15, 2009