

Brass-a-palooza Application



Contact Information:

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Registration Type:

Please check next to the type of registration you would like to submit:

- | | |
|--|------|
| _____ Early Registration (individual) | \$10 |
| <i>Must be postmarked/sent by January 24, 2025</i> | |
| _____ Normal Registration (individual) | \$15 |
| _____ Part of a school group attending | TBD |
| <i>Paid as a group by the director (director should contact Dr. Ginocchio for group rates)</i> | |

****Note: The Finale Concert and the Guest Recital is free and open to the public.**

Instrument:

Primary brass instrument you play: _____

Years you have played: _____ Private study? (circle) Yes / No How long?: _____

if yes, name of teacher(s): _____

Check next to the experiences you have had in playing this instrument:

- | | | |
|---|------------------------|----------------------|
| _____ Middle School Band | _____ High School Band | _____ College Band |
| _____ Community Band | _____ Honor Band | _____ All-State Band |
| _____ Solo & Ensemble (which? _____ solo and/or _____ ensemble) | | |
| _____ Other, non-school groups in which you have played (please list below) | | |

- _____ Other solo performances you have done (please list below)

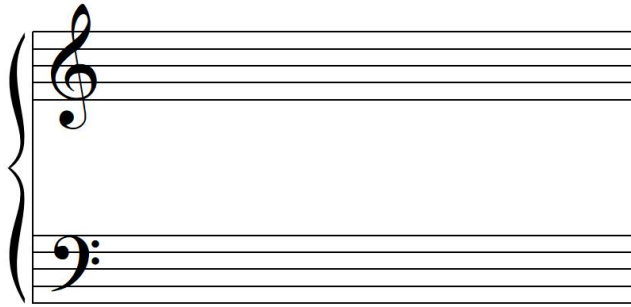
(please continue on the next page)

Please circle the number that you believe represents your current ability level on this instrument.

Beginner-----Intermediate-----Advanced-----Professional

1 2 3 4 5 6 7 8 9 10

On the staff below, please provide the lowest and highest notes that you feel comfortable playing on your instrument.



Do you play any other brass instruments? _____

School Information (if you are in school):

School Attending: _____

Band Director: _____

Grade in School: _____

Lunch Information:

Please list any dietary restrictions or allergies I need to know to plan lunch for you.

Lunch is included in the individual and school registration costs, but not the masterclass-only.

Please print, complete, and send along with payment to:

"Brass-a-palooza"
c/o Dr. John Ginocchio
SMSU Bands
1501 State Street
Marshall, MN 56258

*Checks should be made out to **SMSU Bands**.*