## **ATG ENTRY FORM**

For Office Use:	Contestant #_	Teacher/Studio #	_
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Mark Here If This Is A Digital Accordion Entry  $\Box$ 

## **DUET**

(Please note – if contestant is participating in more than one duet category with a <u>different partner</u> – please use a separate entry form for each additional duet pairing)

CONTESTANT NAI	NTESTANT NAME		AGE on July 19, 2017	
ADDRESS			CITY	
STATE	ZIP	COUNTRY		
PHONE #	CELL #	E-MAIL		
TEACHER/STUDIC	NAME			
Duet – Name of Part	ner		AGE on July 19, 2017	
Additional Instrumer	nt Being Played in Class D1_			

Class #	Age Limit Per Category List	Name of Selection(s)	Composer/Arranger	Duration (minutes)	Fee (\$)
D1		1.	1,	1.	
		2.	2.	2.	
D2					
D3					
D4	32 & Over				
D5	Any Age				

Entry Deadline: Must Be Received By June 19, 2017