

PETROFF PIANO COMPETITION ENTRY FORM:

Name of Student: _____

Mailing Address: _____

eMail (if available): _____

School Grade: _____ How long have you played? _____

Enter the name of the Petroff composition that you will play.

Title of the Petroff piece: _____

You are expected to choose and play a contrasting piano piece.

Your choice was composed by: _____

Name of composition: _____

Approximately how long does it take to play it? _____

Name of the student's piano teacher: _____

Teacher's Address: _____

City and Zip Code: _____

Telephone: _____

eMail (if available): _____

Students and teachers are encouraged to send questions about the music to the composer@rpftx.org (Dr. Petroff) or by regular mail at the address below.

Mail this entry with the fee of \$18.00 (eighteen dollars) to:

The Rose Petroff Foundation
28247 Ruffian
Fair Oaks Ranch, TX, 78015

Signature of student: _____

Signature of teacher: _____

Teacher signed: _____ Student signed: _____