

Mount Dora Music Festival Scholarship Application

All applications must be received by April 5, 2010

Please print or type clearly

Name: _____

Address: _____

City: _____ State/Zip Code: _____

Email:* _____

Telephone: _____

Grade: _____ School: _____

Mark One:

_____	Piano	_____	Instrument
_____	Brass/Woodwinds	_____	
_____	Strings	_____	
_____	Voice Part	_____	

Music Selection
Composer: _____

Title: _____

Movement: _____

Accompanist
Name: _____

**email used as primary communication with participants if needed.*

Please mail to:

**Mount Dora Music Festival
P.O. Box 712
Mount Dora, FL 32756
Attn: Scholarships**