

Media Authorization Form

I give permission for my child to be included in any media Coverage, including Vivace/Chamber Strings' website, that is related to Vivace/Chamber Strings activities.

Yes ___ No ___

I give permission for my child's photo to be used in brochures promoting Vivace/Chamber Strings.

Yes___ No ___

I give permission for my child to be videotaped or video-recorded while performing for an audition or instructional purposes.

Yes___ No ___

Parent/Guardian's Name (Print): _____

Parent/Guardian's Signature: _____ Date: _____

1. Competition fee: Please mail the check or money order to: "**Vivace**" along with your application form. Your application will not be considered complete until payment is received.

Mail to: Ms. Leah Kim

Villa Maria Academy Music Department

370 Central Ave. Malvern PA 19355

2. There will be a winners' concert for ALL winners (MANDATORY to attend/perform.) Competition winners will be listed in the program and on the Vivace website. For more details about the Winners' concert, see 2017 Vivace Competition Rules and Regulations outline.

Please refer any questions to Ms. Leah at vivacecompetition2017@gmail.com

Phone: 610-644-2551 (ext 1044)