

Yvar Mikhashoff Pianist/Composer Commission Project

APPLICATION FORM

PIANIST

Name: _____

Address: _____

Telephone: _____

Email address: _____

Date of birth: _____

COMPOSER

Name: _____

Address: _____

Telephone: _____

Email address: _____

Date of birth: _____

On a separate sheet, please supply the following information for each track on the CDs/DVD submitted.

Track #

Title of work

Composer of work

Composition date for each work

Duration of track

Instrumentation

Names of performers (for chamber works and concertos)

Date of recording

Mail this application and all supporting materials for both pianist and composer to:

Dr. Amy Williams, Competition Coordinator
Yvar Mikhashoff Trust for New Music
204 S. Atlantic Avenue
Pittsburgh, PA 15224
USA

No materials will be returned.