

Calgary APTA Festival Registration

If you require more information, please contact
Calgary APTA committee at aptafestival@gmail.com

STEP ONE – Find class information at <https://festival.aptaonline.net/classes/>
STEP TWO – Fill out ALL information on form
STEP THREE - Pay your registration fee.

TEACHER VOLUNTEER REQUIREMENT

Each teacher is required to submit a volunteer form.

If your teacher has not submitted his/her form, this registration will be cancelled.

Have you checked with your teacher to see if he/she has submitted the Teacher Volunteer Form?

YES NO

PARTICIPANT INFORMATION

- Name: First _____ Last _____
- Phone Number: _____ (### - ### - #####)
- Email: _____
- Age: _____

TEACHER INFORMATION

- Name: First _____ Last _____
 - Phone Number: _____ (### - ### - #####)
 - Email: _____
 - SPECIAL REQUESTS
-

Media Release

I consent to the use of images or video footage taken of myself or my child during the Calgary APTA Festival 2022 to be used to promote the Calgary APTA Festival in the future.

YES NO

REPERTOIRE INFORMATION:

If entering a composition class, please submit your completed composition or a draft along with your registration to
aptafestival@gmail.com

1) **CLASS NUMBER:** _____

TITLE: _____

REFERENCE: _____

(Please include BWV, HOB, TWV, op., no., mvt., when required)

COMPOSER (Last Name Only): _____

(Please include initials for the Bachs)

(Please use abbreviations when needed)

Arranged – **Arr**

Traditional – **Trad**

Attributed – **Att**

Anonymous- **Anon**

Abridged- **Abr**

TITLE #2: _____

REFERENCE: _____ **COMPOSER:** _____

TITLE #3: _____

REFERENCE: _____ **COMPOSER:** _____

ENSEMBLE CLASSES

Additional performer 1	Name First	Last
Additional performer 2	Name First	Last
Additional performer 3	Name First	Last
Additional performer 4	Name First	Last

TOTAL PERFORMANCE TIME: _____ **CLASS FEE:** _____

Please mail to Calgary APTA Committee at 355 Abergale Dr. NE Calgary Alberta T2A 6H9, BEFORE January 15th, 2023,
Include cheque made out to APTA or send e-transfer to aptafestival@gmail.com with password "aptapayment"

2) **CLASS NUMBER:** _____

TITLE: _____

REFERENCE: _____ **COMPOSER:** _____

TITLE #2: _____

REFERENCE: _____ **COMPOSER:** _____

TITLE #3: _____

REFERENCE: _____ **COMPOSER:** _____

ENSEMBLE CLASSES

Additional performer 1	Name First	Last
Additional performer 2	Name First	Last
Additional performer 3	Name First	Last
Additional performer 4	Name First	Last

TOTAL PERFORMANCE TIME: _____ **CLASS FEE:** _____

3) CLASS NUMBER: _____

TITLE: _____

REFERENCE: _____ COMPOSER: _____

TITLE #2: _____

REFERENCE: _____ COMPOSER: _____

TITLE #3: _____

REFERENCE: _____ COMPOSER: _____

ENSEMBLE CLASSES

Additional performer 1	Name First	Last
Additional performer 2	Name First	Last
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Additional performer 4	Name First	Last

TOTAL PERFORMANCE TIME: _____ CLASS FEE: _____

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