

2021
VAIL JAZZ WORKSHOP
Application Form

IMPORTANT: To fill out this application, you must first download it to your computer, and open it with Adobe Acrobat Reader (free, most updated version available at <http://get.adobe.com/reader/>). **If you fill it out in your web browser, your information will be lost.**

After you fill out the form, please:

- 1) Save the completed PDF file with your name (i.e. John Doe.pdf), and email the file to workshop@vailjazz.org. Either sign the last page and send electronically -OR- Print the completed form, sign the last page, and mail the hard copy to the Vail Jazz Foundation (P.O. Box 3035, Vail, CO 81658).
- 2) Ensure that you complete ALL application requirements, including audition video, and attach a high resolution photograph.

Thank you for your cooperation!

CONTACT INFORMATION

First Name

Last Name

Date of Birth (mm/dd/yy)

Gender

Citizenship

E-mail

Cell Phone

Home Phone

Address 1

Address 2

City

State

Zip Code

Primary Instrument

Secondary Instrument (if any)

SCHOOL INFORMATION

School Name

Grade Level

Name of High School Music Director or Jazz Teacher

E-mail

Cell Phone

Office Phone

If you will graduate from high school this year and are going to college:

Name of College

First Day of College (mm/dd/yy)

PERSONAL STATEMENT

Your biography:

History of music studies:

List the bands/groups/orchestras you have played in:

List the name, email address, and telephone number of a musical reference and **indicate what capacity the individual serves (high school band director, teacher, other):**

List music awards, citations, scholarships, etc. that you have received:

History of your jazz playing and listening experiences:

Name your three favorite players on your primary instrument and why you like them:

Your goals for the Workshop:

Your plans for community service:

SCHOLARSHIP INFORMATION

Only students wishing to apply for a scholarship to the Workshop need to fill out this section. Please note that financial information will be kept confidential and will be used only for determining eligibility for scholarship.

I do **NOT** wish to apply for a scholarship

I wish to apply for a scholarship and have completed the financial information below

\$ Total family gross income from all sources – most recent tax return

Number of family members supported by the family income

Check here and attach supporting documentation if there are unusual circumstances that you feel may influence decisions regarding your eligibility for a scholarship.

APPLICANT'S CERTIFICATION

I have read the Instruction for completing this Application and I fully understand my obligations with respect to the Workshop. I hereby certify that the information contained in this Application is complete, accurate and honestly presented.

Date

Applicant's Signature

PARENT OR GUARDIAN'S CERTIFICATION

I hereby certify that the information contained in this Application is complete, accurate and honestly presented.

Date

Parent or Guardian's Signature