

CHECK ONE:  
 I am entering in:  
 New York  
 Los Angeles

**The Loren L. Zachary  
 National Vocal Competition  
 APPLICATION**

**Type or print the information and carefully review the Rules and Regulations before completing.**

NAME \_\_\_\_\_ Age \_\_\_\_\_ Voice Category \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ Day Telephone \_\_\_\_\_  
 CITY AND STATE \_\_\_\_\_ ZIP \_\_\_\_\_ Eve Telephone \_\_\_\_\_

1. List time (if any) spent in accredited music institutions, colleges, or universities having special music departments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
2. List your two most recent voice teachers and/or coach with their addresses, telephone, and dates of study:  
 \_\_\_\_\_  
 \_\_\_\_\_
3. List any professional musical experience you have had including opera, operetta, church solos, recitals, concerts, and musicals:  
 \_\_\_\_\_  
 \_\_\_\_\_
4. List any operatic roles you have learned and indicate the opera and language: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
5. List the 6 arias that you will be prepared to sing at your audition:

	ARIA	OPERA	COMPOSER	LANGUAGE
1				
2				
3				
4				
5				
6				

6. List any operatic ensembles you have learned: \_\_\_\_\_  
 \_\_\_\_\_
7. Are you bringing your own accompanist to the preliminary auditions? YES \_\_\_\_\_ NO \_\_\_\_\_
8. Indicate noteworthy facts: \_\_\_\_\_  
 \_\_\_\_\_
9. Special Requests: (See Rules PART III, E) \_\_\_\_\_  
 \_\_\_\_\_

- CHECK LIST:**
1. A \$40 non-refundable application fee must be included.
  2. Send this original copy, plus 7 additional copies. **Do not reduce or enlarge**
  3. Attach one copy of a resume or biography to the original application. Photo is optional, but may be attached.
  4. Enclose proof of date of birth. The only accepted proof are copies of a Passport or a Birth Certificate. A Driver's License or copy of a Student I.D are not acceptable.
  5. Make a check or money order payable to: The Loren L. Zachary Society.
  6. Sign the application, or it will be returned to you as incomplete.

DEADLINES: NEW YORK REGIONAL AUDITIONS POSTMARK JAN 21, 2009  
 LOS ANGELES REGIONAL AUDITIONS POSTMARK MAR 7, 2009

CANDIDATES SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
 SPONSOR'S NAME, ADDRESS, AND TELEPHONE: (See Rules Part III, B) *This **must** be completed.*

This Application is a part of the Rules and Regulations. Retain the Rules and Regulations and a copy of your completed application for your files and return this Application -with the necessary requirements to:  
 The Loren L. Zachary Society, 2250 Gloaming Way, Beverly Hills, CA 90210 -1717. Questions? 310 276-2731. 09/08w