2022 DORIAN KEYBOARD FESTIVAL REGISTRATION FORM
November 12, 2022

Student's Name(s) (include both names if duet)_____

Gender_____   Date of Birth_____

Student's Address_____

City_____   State_____   Zip_____

Parent Phone (____)_____   Parent Email _____

Student Phone (____)_____   Student Email _____

Student's School_____ Current Grade in School_____ Years of Study in Piano_____

Has the student participated in the Dorian Keyboard Festival in the past? Yes_____   No_____   Not Sure_____

One session per application form.

_____ 20-min closed session ($30.00)   _____ 20-min masterclass session ($30.00)

_____ 30-min masterclass session ($40.00)   _____ 30-min closed session ($40.00)

If solo: Piano_____   Organ_____   If duet: 1 piano_____   2 pianos_____

Please list any times that the student could NOT attend a session due to a specific conflict on the day of the festival. Sessions take place from 9:30 am -11:00 am and 1:00-3:00 pm. _____

-Due to the high number of sessions we have to schedule, we appreciate you being flexible with session times unless you have a specific conflict on the day of the festival. Students within 2 hours of Decorah should plan on having a morning session so that we can reserve afternoon times for those with a longer drive.

Would the student like to be considered for one of the student honors recitals?   Yes_____   No_____

Are you interested in participating in one of the organ exploratory workshops?   Yes_____   No_____

Are you interested in participating in one of the harpsichord exploratory workshops? Yes_____   No_____

-We encourage all students to attend at least one workshop during the festival day. This is a great opportunity to get the student's hands (and feet) on instruments that they may not regularly have access to. Our keyboard faculty is excited to share their knowledge and passion for these instruments with your students!

SENIORS: Would you like your session to serve as an official audition for a Luther College Music Scholarship?
        Yes_____   No_____

Requested Clinician (not required) _____

Applicant's Repertoire Selection_____

Composer_____

Private Instructor_____

Instructor's Address_____

City_____   State_____   Zip_____   Phone (____)_____

Instructor's Email_____

Instructor's Comments: _____

(REQUIRED. Include past repertoire, important info, etc. Use back of form if needed.)

Registrations must be postmarked by Oct. 25, or sent via email by Oct. 31.
Mail form to: Ella Sneltjes, 700 College Dr, Decorah, IA 52101. Email scanned form to: snelel01@luther.edu