

2019 NFMTA LOCAL AUDITION AFFIDAVIT

2019 NFMTA Local Audition Affidavit NORTH FULTON MUSIC TEACHERS ASSOCIATION Affiliated with Georgia Music Teachers Association and Music Teachers National Association

I, _____, verify that every student whom I have entered in the 2019 NFMTA Local Audition is my student, taught and prepared by me for this audition. I further attest that these students have been entered in only one local GMTA Audition in this calendar year. I realize that failure to comply will result in disqualification of that student and that I will be subject to reprimand from the North Fulton Music Teachers Association. In addition, the Georgia Music Teachers Association will be notified of this noncompliance. I have listed my participating students below. Teacher's Signature: _____

Date: _____

Teacher's Phone #: _____ Teacher's E-mail: _____

List of students entering the NFMTA Local Spring Audition

Please print and include student's name and school grade. Use additional sheets if necessary.

- | | |
|-----------|-------------|
| 1. _____ | GRADE _____ |
| 2. _____ | GRADE _____ |
| 3. _____ | GRADE _____ |
| 4. _____ | GRADE _____ |
| 5. _____ | GRADE _____ |
| 6. _____ | GRADE _____ |
| 7. _____ | GRADE _____ |
| 8. _____ | GRADE _____ |
| 9. _____ | GRADE _____ |
| 10. _____ | GRADE _____ |
| 11. _____ | GRADE _____ |
| 12. _____ | GRADE _____ |

List any time requests. Note – Time requests are limited to 20% of your students auditioning.

This form will be submitted to the GMTA as a part of an auditing process for the In-State Auditions at the local level. Please return this form to Dawn Dalangin Hawk.