

SELECT STUDENT COMPETITION REGISTRATION FORM 2026

(To Be Filled Out By the Teacher)



Teacher's name _____ Phone: _____

E-mail address _____

I prefer being notified of the competition schedule via _____ phone _____ email (check one or both)

Teachers: please submit the following together for all of your participating students in one envelope:

- all participating student registrations
- judges' forms (two copies per student)
- one check (non-refundable) for all competing students combined (payable to Hartford Chapter CSMTA)
- Documentation of students' current school grades

IMPORTANT:

- ❖ Students **MUST** be available for the Winner's Recital in order to be eligible for this competition. Please ensure this prior to sending in the registration forms.
- ❖ Forms from individual students will not be accepted - all forms and documentation must be sent by you, the teacher, along with one check which includes registration fees for all of your participating students.
- ❖ Please double-check all student forms for completion. *Missing information will result in disqualification.*

Mail to: Irina Zayaruzny, 249 Guinivere Ridge, Cheshire, CT, 06410

Registrations **MUST** be postmarked no later than April 1, 2026.

Please do NOT staple check to registration forms

Competition Information:

- ❖ Date: May 2, 2026
- ❖ Place: South United Methodist Church, 1226 Main Street, Manchester, CT
- ❖ Time: Teachers will be notified of the schedule and must convey this information to their competitors.
- ❖ Time Limits: Grades 2-6: 5 minutes; Grades 7-12: 8 minutes

Winners' Recital Information:

- ❖ Date: May 9, 2026
- ❖ Place: South United Methodist Church, 1226 Main Street, Manchester, CT

Teacher participation at the competition is required. Please indicate your preferred time slots by indicating "first choice" or "second choice": _____ 9am-1pm or _____ 1pm-5pm

SELECT STUDENT PIANO COMPETITION

APPLICATION: GRADES 2-6



We are so pleased that you are registering for the Select Student Piano Competition.

Please do the following (check off each):

- ☐ Submit this application to your teacher with \$36.00 (non-refundable)
- ☐ Use a stopwatch to time your pieces. Include info in application (below)
- ☐ Be accurate, legible, and complete. Missing information will result in disqualification.
- ☐ Bring your original scores to the competition (no copies). Please number the measures.

Name of student: _____ Age: _____ Grade: _____

Parent Name: _____ Phone: _____

Address: _____

Composer: _____ Timing (limit 5 mins): _____

Composition Title (entirety): _____

Parent Signature: _____ Date: _____

Teacher Signature: _____ Date: _____

Teacher Name (please print): _____ Phone: _____

Please tear off and keep the portion below for your information:

Competition Information:

- ❖ Date: May 2, 2026
- ❖ Place: South United Methodist Church, 1226 Main Street, Manchester, CT
- ❖ Time: Teachers will be notified of the schedule and must convey this information to their competitors.

Winners' Recital Information:

- ❖ Date: May 9, 2026
- ❖ Place: South United Methodist Church, 1226 Main Street, Manchester, CT

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SELECT STUDENT PIANO COMPETITION

APPLICATION: GRADES 7-12



We are so pleased that you are registering for the Select Student Piano Competition.

Please do the following (check off each):

- ☐ Submit this application to your teacher with \$39.00 (non-refundable)
- ☐ Use a stopwatch to time your pieces. Include info in application (below)
- ☐ Be accurate, legible, and complete. Missing information will result in disqualification.
- ☐ Bring your original scores to the competition (no copies). Please number the measures.

Name of student: _____ Age: _____ Grade: _____

Parent Name: _____ Phone: _____

Address: _____

Composer: _____ Timing (limit 8 mins): _____

Composition Title (entirety): _____

Parent Signature: _____ Date: _____

Teacher Signature: _____ Date: _____

Teacher Name (please print): _____ Phone: _____

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