

THE 19TH ANNUAL

James & Katherine Andrews Young Artist Competition

Saturday, January 24, 2026 at 10 a.m., Snell Theater, SUNY Potsdam

APPLICATION

Please print clearly

PERSU	NAL INFORMATION		
Name:		Age:	
Home Address:			
Home Phone:			
Name of Parent(s)/Guardian(s):			
Student's Email:			
Jr. High/High School:		Grade:	
PERF	FORMANCE PIECE		
Composer, Composition & Movement MUST approved in advance by the ONNY Music Dir			
Instrument	Composer	_Composer's Dates:	
Name of Composition:			
MVT# & Title:		ngth:	
NOTE: ACCOMPANIMENT WILL BE REQUIRED FOR ANY INSTRUMENT OR CONCERTO INCLUDING PIANO.			
RI	EQUIREMENTS		
 □ \$75 non-refundable Entry Fee for EACH inst □ Bring one copy of a pdf of piano reduction or □ Hometown newspaper: 		check payable to "ONNY"	
	ENT CERTIFICATION		
This certifies that: ☐ I will follow the rules and accept the decision o ☐ I attest that the live audition will be done FROMEMORY.	ONNY and may be u without compensatio	sed for publicity purposes	
Date:	; <u> </u>	Date:	
Student's Signature	Parent's/Guardia	n's Signature	
My student: ☐ has selected a piece from the official the competition and ☐ has consulted School Teacher:	d the rules.	ling all the requirements of	
City, St., Zip:			
Phone:		Phone:	
Email:			
Teacher's Signature:	Teacher's Signature:	Teacher's Signature:	
Date:	Date:		