

NFMC JOYCE WALSH JUNIOR DISABILITY AWARD
Annual Awards - Application Form

JR 16-2

Entrant must complete application and upload to the NFMC website (www.nfmc-music.org/applicant-file-upload) no later than March 1.

An entry fee of \$10.00 must be paid to be considered for this award. Visit www.nfmc-music.org/payment to pay the entry fee.

Please type or print clearly.

Name: _____

Age: _____ Date of Birth _____

Telephone () _____ E-mail: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Voice _____ Years of Study _____ or

Instrument _____ Years of Study _____

On my honor I swear that I am an American citizen born on _____ in _____
(Date of birth) (Place of birth)

Or naturalized on _____ in _____
(Date of naturalization) (Place of naturalization)

I am eligible to enter this contest according to the rules outlined:

As a member of the _____ federated junior club or organization for the
current year of the contest in the state of _____.

As an individual junior member of the (State) _____ Federation of Music Clubs
for the current year of the contest.

To pay the membership fee of \$13.00 for annual dues visit www.nfmc-music.org/payment.

I hereby certify that the above information is correct and that I have read the Requirements and
understand that my failure to abide by them will result in disqualification.

Signature _____

How did you hear about this award? _____

Note: NFMC Winners will be required to submit their social security number and form W-9 to the NFMC
Treasurer (IRS rule). 1st place winners are not eligible to compete again.

Questions or concerns should be directed to the National Chair: Dr. John D. Kelly - H: 870-932-1025; C: 870-
974-3132; jkelly@astate.edu.

*In the event of financial shortfalls, advertised award amounts may be adjusted. Applicants would be notified of the award change.