

The 2010 NZSO Todd Corporation Young Composer Awards



Application Form

STEP 1

Name _____

Address _____

Date of Birth _____ Age on 31/12/10 _____

Telephone Ph () _____

Fax () _____ Mob() _____

Email _____

Title of Work _____

Duration _____

Instrumentation (please check the available instrumentation carefully) _____

Other comments about the work (e.g. Special difficulties) _____

STEP 2

Signed _____ Date _____

Please complete and return this form along with the score, brief programme note and short biography by 5pm, Monday 3rd May 2010 to:

Young Originals
New Zealand Symphony Orchestra
PO Box 6640, Marion Square
Wellington 6141

