

MASTA Chamber Music Festival

March 4, 2019 ○ University of Michigan - Ann Arbor, MI

Guest Artist: Muse Ensemble

Description

The purpose of the MASTA Chamber Music Festival is to provide students in grades 7-12 with the opportunity to attend a high-quality artistic chamber music performance, receive coaching from expert chamber music performers, and attend musicianship enrichment classes. As part of the festival, students in grades 9-12 may elect to participate in a competition for the opportunity to represent MASTA at the Michigan Youth Arts Festival at Western Michigan University in Kalamazoo.

Schedule

Registration: 9:30 a.m.

Sessions: 10:00 – 2:35 p.m.
(with break for lunch)

Competition: 3:30-6:30 p.m.

Eligibility

Festival Only

- Students must be in grades 7-12 and recommended by their teacher/coach.
- Students must be legal residents of Michigan.
- Ensembles must consist of at least 3 players;
- The majority must be strings—violin, viola, cello, double bass, harp, and/or guitar.
- Examples of ensembles include string trios, quartets, quintets, piano trios etc.

Festival *and* Competition

- Students must be in grades 9-12.
- Students must be legal residents of Michigan.
- Students must participate in festival in order to compete.
- Ensembles must consist of at least 3 players.
- Music must be from standard chamber literature.
- Performance cannot be conducted.
- Only one player per part.

Students may participate with one ensemble only.

Competition Prize

The winning ensemble will receive a prize of \$200 and must be available to represent MASTA at the Michigan Youth Arts Festival (MYAF) at Western Michigan University in Kalamazoo. At the MYAF, the ensemble will give four performances at the Michigan Youth Arts Festival in May 2018 and will need to prepare 20-30 minutes of music in addition to its MASTA competition. A MASTA board member will be at the festival to serve as a guide for the ensemble, and the ensemble will receive coachings to prepare for the MYAF. Members of the winning ensemble are eligible to perform with the MYAF Honors Orchestra (or any other ensemble). If a member of the winning ensemble applies to perform with the Honors Orchestra they must follow through on that commitment, as it prevents another student from receiving an invitation.

Questions?

Contact Dr. Michael Hopkins: mhopkins@umich.edu

Registration and Payment Invoice

1. Complete the online registration form available at this link or through the MASTA website.
2. Print and mail this form with payment by **February 1** to the address below.

Teacher/Coach

Name _____

Mailing Address _____

Phone Number _____

Ensemble

Name _____

Number of Students _____

Payment

Festival and Competition: \$50 per student _____

Festival only: \$45 per student _____

Non-ASTA Member Fee _____

(add \$10 if the teacher/coach is not an ASTA Member)

Total Payment Included _____

Please print and mail this form with a check payable to MASTA Chamber Music to:

Dr. Michael Hopkins
University of Michigan School of Music, Theatre, and Dance
Earl V. Moore Building
1100 Baits Drive
Ann Arbor, MI 48109-2075

Questions?

Contact Dr. Michael Hopkins: mhopkins@umich.edu



MEDIA, PHOTO & VIDEO RELEASE FORM

Program/Camp:

Date(s):

Time(s):

Location:

Please check one box:

Yes - Media, Photo and Video Authorization

I understand that during the course of my child’s participation in the above-referenced activity, that the Program, and those acting with the Program’s permission or authority, may capture my child’s name, likeness, image, or voice in photographic, audio, video, digital or other recording forms (“Recordings”). I give my permission for the Program to use those recordings or works produced by my child (e.g., art work) for promotional, commercial, informational, and educational purposes in any and all media (including the Internet) now existing or hereafter devised, for any purpose consistent with the Program’s mission. I understand that I will not have an opportunity to review or approve uses of the Recordings or Works.

I recognize that the Program, through the Board of Regents of the University of Michigan (“University”), holds the copyright in all Recordings. I understand that neither my child nor I will receive payment or any other compensation for the taking or use of any Recordings or Works created as a result of my child’s participation in the Program.

I release, indemnify and hold harmless the University from and against all liability, actions, debts, claims and demands of every kind whatsoever to the taking or use of the Recordings or Works of my child.

No-Media, Photo or Video Authorization

I do not grant permission to Program to take or use my child’s name, likeness, image, or voice in any form or to use work produced by child for any reason unless necessary for the administration of the Program while my child is participating in the Program.

Participant’s Name:

Parent/Legal Guardian’s Name:

Parent/Guardian Signature:

Date:



PARTICIPATION AGREEMENT AND WAIVER FORM

PROGRAM/CAMP INFORMATION

Parents and legal guardians are responsible for carefully reviewing all program materials and for selecting programs that are appropriate for their child. Information regarding University of Michigan sponsored programming for children and teens is available at childrenoncampus.umich.edu.

Program/Camp Name: _____ (hereafter "Program")

Date(s): _____

Location: _____

PARTICIPANT INFORMATION

Name of Participant: _____ (hereafter "Participant")

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Date of Birth: _____ Gender: Male Female

PARTICIPATION AGREEMENT AND WAIVER

I understand that my child's participation in the Program is voluntary and that as I condition of my child's participation, I agree to comply with all Program requirements including, but not limited to: (a) accurately completing all registration forms in a timely manner, (b) ensuring that my child is aware of the Program's standards of conduct; (c) and immediately notifying the Program Administrator of any concerns related to the health, safety or security of my child, other participants, or Program staff.

I understand that as part of my child's participation in the Program that there are dangers, hazards and inherent risks to which my child may be exposed, including the risk of serious physical injury, temporary or permanent disability, and death, as well as economic and property loss. I further realize that participating in the Program may involve risks and dangers, both known and unknown, and I have chosen to allow my child to take part in the Program. Therefore, I, and on behalf of my child, have determined that it is reasonable to accept all risk of injury, loss of life or damage to property arising out of training, preparing, participating, and traveling to or from the Program and I do voluntarily accept and assume those risks.

I release the University of Michigan, its Board of Regents, Administration, Faculty, Staff, Graduate Students, and all other officers, directors, employees, volunteers and agents from any claims or liability arising from my child's participation in the Program, provided that such claim is not due to the gross and sole negligence of the released parties.

In the event of an accident or serious illness, I authorize representatives of the University to obtain medical treatment for my child. I hold harmless and agree to indemnify the University from any claims, causes of action, damages and/or liabilities, arising out of or resulting from said medical treatment. I further agree to accept full responsibility for any and all expenses, including medical expenses that may derive from any injuries to my Child that may occur during his/her participation in the Activity.

I also agree to indemnify the University and all of its employees and agents from any financial obligations or liabilities that my child may cause while participating in the Program, including attorney's fees and court costs resulting from his/her misconduct, errors, or omissions.

I acknowledge that University employees have undergone criminal background checks, but other participants of the event may not have undergone background check screening. As such, the University makes no assertions or assurances with respect to other participants.

This Agreement is governed by and construed under the laws of the State of Michigan without regard for principles of choice of law. Any claims, demands, or actions arising under this Agreement must be brought in the Michigan Court of Claims or a court with applicable subject matter jurisdiction sitting in the state of Michigan and I consent to the jurisdiction of a Michigan court with appropriate subject matter jurisdiction.

I agree that the terms and conditions of this Agreement are binding on my representatives, heirs and assigns.

Parent/Guardian Name _____

Parent/Guardian Signature: _____ Date: _____