



The Bill Conti Big Band Arranging & Composing Competition

ALIAS FORM

IMPORTANT!: When complete, insert this form in a sealed envelope, label it "Alias Form" and include with all other materials in your Submission Packet

(Please print clearly or type)

Real Name _____

Alias Name *(as indicated on your Application Form)* _____

Address _____

City _____ State/Country _____ Postal Code _____

Country of Citizenship _____

Telephone *(cell)* () _____ Telephone *(home)* () _____

E-mail address _____ Website? _____

Are you currently a member of ASMAC? (Y/N) _____ **(If not, please contact www.ASMAC.org to join)**

All applicants must be a Student or Associate member of ASMAC upon submission.

By signing below, applicant gives rights to ASMAC to record, videotape, photograph, publicize and print his/her likeness and all matters incidental thereto in relation to ASMAC.

Name *(print)* _____ Telephone _____

Signature _____

Signature _____

Parent's or Guardian's Approval *(if applicant is under 18)*

Please Email or ***send this form and all other materials*** by September 1, 2020, to either

ASMACCompetition@gmail.com

or

**ASMAC COMPETITION
5903 NOBLE AVENUE,
VAN NUYS, CALIFORNIA 91411**