APPLICATION FORM 2026

(email this completed form to composition@wccband.org by December 31, 2025) WASHTENAW COMMUNITY CONCERT BAND YOUNG MICHIGAN COMPOSERS CONCERT BAND COMPOSITION CONTEST

Composer/applicant's name:		
Street Address:		
City:	State:	ZIP:
Phone:	Email:	
	Eligibility	
Date of birth: (month, day, year)	
If "yes," name of high s	chigan:	
0 0	e/university and degree held:	
	nployee or under contract to any publ	
	Composition	
Composition title:		
Length of composition: (minute	es/seconds):	
This composition is intended fo band). U yes	r middle-school bands (or a very your	ng or very small high school
If "yes," what level do y	you estimate it to be?	
Composition adheres to all requ	irements stated under Composition R	equirements. 🗆 yes 🛛 no
	re read and accept the Washtenaw Con concert Band Composition Contest rule	•
Signature:	Date:	