



Manitoba Registered Music Teachers' Association Application for Membership

Application Fee: A Non-refundable fee of **\$25.00** payable to MRMTA must be submitted with the completed Application Form. (*Student Teacher exempt*)

Membership Fee: A post-dated cheque matching your filing deadline must accompany your application.

**Return completed form and supporting material to:
Gina Wedel, 410 Niagara St.; Winnipeg, MB R3N 0V5**

PLEASE PRINT CLEARLY

PERSONAL INFORMATION

Name _____ Phone _____
Other _____
Address _____ Fax _____
City _____ Province _____ Postal Code _____
E-Mail _____ Website _____

CONTACT (STUDIO) INFORMATION

Is your studio location at a different address from the one listed above? Yes or No
If yes, please complete the following section.

Name _____ Phone _____ Other _____
Address _____ Fax _____ E-mail _____
City _____ Province _____ Postal Code _____ Website _____

Do you wish to have your second address entered on the website yes no
(NOTE: Additional/second address listing/posting has a surcharge of \$25.00)

CURRENT MEMBERSHIP STATUS:

(Please check one)

I wish to apply for: Full Membership Interim Membership Student Teacher Membership

Branch Affiliation (check one):

- Southern Manitoba Brandon & Westman
- Independent (more than 80 km from a branch) Winnipeg & Region _____

TEACHING EXPERIENCE: Supporting Material Attached.

For how many years have you taught? Privately _____; What Levels? _____

In a Grade School _____; In a Conservatory _____ or a University _____

EDUCATION: Indicate level of education attained. **Supporting Material Attached**

- | | | |
|--|---|---|
| <input type="checkbox"/> Grade 9 Music Certificate | <input type="checkbox"/> Grade 10 Music Certificate | |
| <input type="checkbox"/> Associate in Performance | <input type="checkbox"/> Associate in Teaching | <input type="checkbox"/> Licentiate |
| <input type="checkbox"/> Bachelor of Music | <input type="checkbox"/> Bachelor of Education | <input type="checkbox"/> Other Undergraduate Degree |
| <input type="checkbox"/> Master of Music | <input type="checkbox"/> Doctorate of Music | <input type="checkbox"/> Other Graduate Degree |
| <input type="checkbox"/> Pedagogy courses (specify) _____ | | |
| <input type="checkbox"/> Letter of reference from MRMTA member (required by Student Teacher Membership applicants) _____ | | |
| <input type="checkbox"/> Other _____ | | |

SUBJECT AREAS OF REGISTRATION (Documentation MUST be provided for EACH area in which you wish to be recognized).

Please indicate the areas of specialization for which you are both qualified and wish to be recognized by the Manitoba Registered Music Teachers' Association. For up-grade please mark appropriately.

(Members cannot be listed or advertise in a subject in which they have not had approval from the Membership Committee).

- | | | |
|--|--|---|
| <input type="checkbox"/> Alexander Technique | <input type="checkbox"/> French Horn | <input type="checkbox"/> Singing |
| <input type="checkbox"/> Aural Musicianship | <input type="checkbox"/> Harpsichord | <input type="checkbox"/> Singing Pedagogy** |
| <input type="checkbox"/> Accordion (Piano) | <input type="checkbox"/> Harp | <input type="checkbox"/> Theory: Rudiments |
| <input type="checkbox"/> Bass | <input type="checkbox"/> History | <input type="checkbox"/> Theory: Advanced * ** |
| <input type="checkbox"/> Bassoon | <input type="checkbox"/> Instrumental Conducting | <input type="checkbox"/> Therapeutic Voice Work |
| <input type="checkbox"/> Choral Conducting | <input type="checkbox"/> Oboe | <input type="checkbox"/> Timpani |
| <input type="checkbox"/> Clarinet | <input type="checkbox"/> Orchestration | <input type="checkbox"/> Trombone |
| <input type="checkbox"/> Classical Guitar | <input type="checkbox"/> Organ (Electronic & Pipe) | <input type="checkbox"/> Trumpet |
| <input type="checkbox"/> Composition | <input type="checkbox"/> Percussion | <input type="checkbox"/> Tuba |
| <input type="checkbox"/> Early Childhood** *** | <input type="checkbox"/> Piano | |
| <input type="checkbox"/> English Horn | <input type="checkbox"/> Piano Pedagogy** | <input type="checkbox"/> Viola |
| <input type="checkbox"/> Euphonium | <input type="checkbox"/> Recorder | <input type="checkbox"/> Violin |
| <input type="checkbox"/> Flute | <input type="checkbox"/> Saxophone | <input type="checkbox"/> Violoncello |
| <input type="checkbox"/> Other (please specify) _____ | | |
| <input type="checkbox"/> I will conduct the lesson in a foreign language (specify) _____ | | |

* Includes harmony, counterpoint, analysis – provide documentation of successful teaching in all levels & disciplines

** Provide documentation of successful teaching

*** Registration in Early Childhood requires registration in at least one other instrument

ADDITIONAL DOCUMENTATION REQUIRED BY ALL APPLICANTS:

- A COPY OF A RECENT (within the past 3 months) CHILD ABUSE REGISTRY OR CRIMINAL RECORD (VULNERABLE SECTOR) CHECK.

I CERTIFY THAT ALL INFORMATION ENCLOSED IS CORRECT

Signature _____ Date _____

(Membership fee to be returned if application is unsuccessful)
(Full & Interim Membership Fees include \$30.00 liability insurance).

