

APPLICATION for COMPOSERS

The American Prize in COMPOSITION (opera / theater / film / dance division), 2025-26 Thomas Putsché Memorial Award

Refer to the website (www.theamericanprize.org) for application DEADLINES.

SELECT the category in which	h you are ap	plying. (Choo	se only one.) If yo	u are applying	g in more than on	e composition
contest and/or for the BACON award, pleas	e complete those	application(s) and	check this box:			•
$\ ^\square$ professional composer $\ ^\square$ college/univer $\ ^\square$ Please consider this application for the Man				etails)		
Print your name						
Permanent Address						
City	State	Zip	Phone ()		
Your email (print)		Confirm emai	l (print)			
List each work						
EMAIL required of ALL applied Identify the applicant in the subject line of a second s			<u>om</u>			
☐ 1.A 150 word (maximum) biography of the applicant win The American Prize. Include	e artist(s) sent in	the body of an em			io will be printed	verbatim should
\Box 2.A photograph of the artist(s) (JPEG or F	'GN only) sent as	an attachment. Be	sure the file name	e includes app	olicant's name.	
□ 3. The name and email addresses of up to American Prize, such as local newspapers, rath THE SPRINGFIELD TIMES arts editor: arts@	dio or television st	tations, alumni nev	vsletters, etc. Pleas	se list them in	this format: (exa	mples:
A. APPLYING ONLINE: pay fees via ou content—see above—include links to online below).	recording(s). Sign	form below. Attac	ch PDFs (see webs	site) or send	two SCORES BY	
PAY APPLICATION FEE \$65	PATPAL nttp:	://www.tneamerica	inprize.org/PayCo	mpetitionree	s.ntmi	
B. APPLYING BY MAIL & EMAIL:						
MAIL: I. A hard copy of this applicatio	n. Include stamped	d self-addressed en	velope (minimum	size must be	IIxI4 in.) for the	e return of scores.
$\hfill\Box$ 2.Two identical recordings of th sleeve. No loose discs, please. (See website for						
$\ \square$ 3. Don't forget to send the req	uired email.					
PAY APPLICATION FEE \$65	PAYPAL http	o://www.theamerica	anprize.org/PayCo	mpetitionFee	es.html	
\Box CHECK OR MONEY	ORDER made out	t to: HCMT/The A	merican Prize, 25	Hamilton Dr	ive, Suite 100, Dar	nbury, CT 06811
☐ CREDIT CARD						
Please charge my credit card: \Box MC \Box V	□ DSC					
Card No				Exp	CVV*	
				- !	*3-digit co	de on back of card
If making multiple applications, they disc and EACH fee in the same envelope. No	may be sent toge	ther. Be sure to inc	clude the applicati			2 copies of EACH
SIGNATURE: By signing this form, you agree to abide by all the rules of The Americal lish the photo and biographical information of	an Prize competiti	on, agree to accep	t related emails fr	om The Amer	rican Prize, and au	
Signature Completed applications will be confirmed by	Na email.The decisic	ime ons of the judges a	re final.		Date	

The American Prize is administered by Hat City Music Theater Inc., a 501(c)3 nonprofit organization based in Danbury, CT.