

**Wabeno Area Players**

**Huisman Honors Recital**

The Huisman Honors Recital Competition honors longtime educator and arts supporter Richard Huisman. Richard was a teacher, principal and superintendent for the School District of Wabeno Area. As an educator, Mr. Huisman believed that young people should have the opportunity for a well-rounded education, including technology, athletics, and the arts.

**We have made a few changes** to this competition based on feedback from prior years. The honors recital competition is open to musicians in parts of Wisconsin and Upper Michigan who have performed a Class A accompanied solo for the 2025 WSMA Solo and Ensemble Season. Each student entrant must perform the music that they prepared for Solo and Ensemble. Students will first be evaluated by our committee, then further evaluation will be completed by independent music educators. Eight to twelve students will be selected to perform at the honors recital. Each student chosen will receive a plaque of merit for being chosen to represent their school and community. A minimum of three performers will receive a scholarship, with the top award being a minimum of $1,000. Scholarships may be used for music related activities such as lessons, camps, etc., or for college expenses.

**Students and their accompanists must be able to** **perform Saturday, May 17, 2025, at 7:00pm**. The event will be held in The Nancy Volk Auditorium at Wabeno High School, and will be a part of the Wabeno Area Players Fine Arts Series. The competition and recital will be publicized and open to the general public. All students must provide their own personal accompanist for the recital performance.

Procedural Guidelines

* The application form, biographical information, audition recording, and a copy of your music with accompaniment are due **on** **or before Saturday, April 26th, 2025**. (Biographical information will only be used for those chosen for the recital and will only be used for publicity and in the program for the recital.) **You will receive an email reply from Mary Ellen Keller when we receive your application.** If you do not hear from her by April 29th, please call her at (715)927-7065.
* The video recording, music, and audition form may be sent via email to wabenoareaplayers@gmail.com or mailed to *Wabeno Area Players, P.O. Box 325, Wabeno, WI 54566*.
* All recordings must be of good quality. Flash drives are accepted by mail.
* At the beginning of the recording, state your name, grade, school and selection you will be performing.

Appropriate dress for the recital performance shall be as follows:

* If performing a Musical Theatre selection, it must be performed in costume.
* For all other performances, dresses or skirts of adequate length (at least to the knee when seated), OR dress shirt and slacks. Ties, vests, bow ties, and/or suits are encouraged but not required.
* NO JEANS (unless it is for Musical Theatre, as noted above)
* Dress shoes only; (not sneakers, gym, tennis, boat shoes, platform shoes, or flip-flops.)
* Hair must be neat and out of the performer’s face.
* Apparel must be modest and non-revealing

School music educators, students, and parents/guardians will be informed by email by May 5th, 2025, and by letter shortly after, if the students are chosen for the recital. For further questions regarding the competition and recital procedure, please contact wabenoareaplayers@gmail.com or call (715) 927-7065.

We look forward to hearing your performance!

Wabeno Area Players

Huisman Recital Committee

Maline Enders, Co-Chair Mary Ellen Keller, Co-Chair



**APPLICATION FOR HONORS RECITAL COMPETITION**

This application form, your audition recording, and a copy of your music with accompaniment, are due on or before **Saturday, April 26th, 2025.** Please send all audition materials via email to *wabenoareaplayers@gmail.com* **OR** send by US Postal Service to *Wabeno Area Players, P.O. Box 325, Wabeno, WI 54566*. If sending through US mail, please include student name on all pages and recordings. All recordings must be of good quality. At the beginning of the recording, state your name, grade, school and selection you will be performing.

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_\_\_\_\_

Instrument: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Voice: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Selection Title (including No., Op., key, movements performing, name of opera/musical as applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Interesting aspects and/or history of your selection (100-word minimum) attached separately to the application. If performing a vocal selection in a foreign language, please include the English translation.**

Length: \_\_\_\_\_\_\_\_\_\_\_\_ Composer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of accompanist (please print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***I authorize Wabeno Area Players to use my name and/or image for publicity purposes for the Huisman Honors Recital Competition, including social media outlets and print media.***

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name(s) (please print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian/Student Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Best contact phone numbers (in case we have questions about your application, or glitches with your recording)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Teacher) (Student)/(Parent/Guardian)

Teacher Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teacher Name (please print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teacher Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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If you are chosen as a performer on the recital, this information will be used as we prepare the program and for the pre-recital meal and post-recital reception.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred pronouns \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Private teacher (if applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What are your plans for after High School? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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How has music impacted your life? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What school music groups and activities have you participated in, and for how long? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Please let us know if you have any dietary needs, food allergies, or sensitivities. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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