

SUMMARY FORM - FEES DUE
ORGANIZATION EVENTS

School..... Class..... Director.....
 Address..... City..... State..... Zip.....
 School Phone..... Home Phone..... Date.....

Check applicable events:

Marching
 Concert & Sightreading

GROUP NAME	1st Group (check one)	2nd Group	Sightreading Voicing	No. of members in this group (est.)	Entry fees for this group
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
				Total fees.....	\$ _____

Check No. _____ Amount \$ _____

Note Vocal : Be sure to fill in the "Sight-reading voicing" and "No. of members in this group" columns. This is important information used in ordering the sight-reading music that you will sing at contest.

Note Band/Orchestra : Be sure you fill in the "No. of members in this group" column. The host needs this information when calculating the number of chairs and stands required for the contest.