

SUMMARY FORM

Solo & Ensemble Events

Note: After filling in all information, print and send to Business Office with your PO for check. They need a copy as an invoice for their records.

School	Address	City	ZIP	Conf.
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Director	School Phone	Home Phone	Date of Event
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EMAIL: SCHOOL: _____ HOME: _____

Event (Check one) Band_____ Twirling_____ Vocal_____ Orchestra_____

SOLOS: Class I _____ Class II _____ Class III _____	PIANO SOLOS: Class I _____ Class II _____ Class III _____
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TOTAL SOLOS _____ TOTAL SOLOS _____

TOTAL **ALL** SOLOS _____ X \$ 7.50 each = \$ _____

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**SMALL ENSEMBLES:**

Class I (# of Ens)\_\_\_\_\_ (Ttl. # Mbrs.) \_\_\_\_\_  
 Class II (# of Ens)\_\_\_\_\_ (Ttl. # Mbrs.) \_\_\_\_\_  
 Class III (# of Ens)\_\_\_\_\_ (Ttl. # Mbrs.) \_\_\_\_\_

|                         |                       |
|-------------------------|-----------------------|
| Total # Ensembles _____ | Total # Members _____ |
|-------------------------|-----------------------|

**MEDIUM ENSEMBLES:**

Open Class (# of Ens)\_\_\_\_\_ (Ttl. # Mbrs.) \_\_\_\_\_

**EXPERIMENTAL ENSEMBLES:**

Open Class (# of Ens)\_\_\_\_\_ (Ttl. # Mbrs.) \_\_\_\_\_

|                         |                       |
|-------------------------|-----------------------|
| Total # Ensembles _____ | Total # Members _____ |
|-------------------------|-----------------------|

TOTAL **ALL** ENS. MEMBERS \_\_\_\_\_ X \$ 5.00 each = \$ \_\_\_\_\_

- - RECAP - -

Total Solo Fees .....\$ \_\_\_\_\_

Total Ensembles Fees .....\$ \_\_\_\_\_

**GRAND TOTAL.....\$ \_\_\_\_\_**

Check No. \_\_\_\_\_ Amount \$ \_\_\_\_\_

(Please attach a copy of this form with your payment)