

TENNESSEE MUSIC EDUCATION ASSOCIATION ALL-STATE SATB CHORUS REGISTRATION



Student Participant

Name: _____

Address: _____

City/State/Zip: _____

Home Phone: _____

E-mail: _____

Voice Part _____

CHECK
AFFILIATION:

ETVA

MTVA

WTVA

School Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Director/Teacher: _____

Student Fee: \$40.00

**THE SPONSORING DIRECTOR/TEACHER IS RESPONSIBLE FOR COLLECTING/PAYING STUDENT FEES.
PLEASE CONTACT YOUR DIRECTOR/TEACHER FOR INSTRUCTIONS.**

INSTRUCTIONS FOR ALL-STATE SATB CHORUS REGISTRATION:

- (1) COMPLETE THE ALL-STATE SATB CHORUS REGISTRATION FORM. (PROVIDE ALL INFORMATION.)
- (2) MAKE FEE PAYMENT AS INSTRUCTED BY YOUR DIRECTOR/TEACHER.
- (3) GIVE COMPLETED FORM AND PAYMENT TO YOUR DIRECTOR/TEACHER FOR REGISTRATION.