Choral Festival Participation Form

Email this form to the Chairperson 30 days before the Choral Festival or by the Chairperson's deadline.

School Name:	School Phone:	
School Address:		
	Coordinator Email:	
Choir(s) Information		
Check one: ☐Elementary ☐Middle Sc	chool Senior High	
Group Name:		
Director Name:	Director Email:	
Accompanist Name:		
Number of Singers: Grade	le Levels in this Group:	
Song Title #1:	Composer/Arranger	
Song Title #2:	Composer/Arranger	
Check one: ☐Elementary ☐Middle Sc Group Name:		
	Director Email:	
Accompanist Name:		
Number of Singers: Grade		
Song Title #1:	Composer/Arranger	
Song Title #2:	Composer/Arranger	
Check one: □Elementary □Middle Sc Group Name: □	•	
Director Name:		
Accompanist Name:		
Number of Singers: Grade		
_	Composer/Arranger	
	Composer/Arranger	