

DIRECTOR'S PARTICIPATION FORM

THIS FORM MUST BE SUBMITTED BY EACH DIRECTOR

SCHOOL NAME: _____

SCHOOL DISTRICT: _____

DIRECTOR'S NAME: (Print) _____

DIRECTOR'S SIGNATURE: _____

By signing, I attest that I hold Pennsylvania certification in music and am employed by the public school district named above; therefore, a member of the Music Educators of Berks County.

DO NOT SEND CASH

Number of students participating ____ enclosed: x \$5.00 each = \$ _____

Check Enclosed (A single check is preferred.)

Make check payable to: "Music Educators of Berks County"

Please have this postmarked to the Orchestra VP by **February 19, 2010**

Vivace Orchestra

Please list numbers of students participating by orchestra and section

First Violin _____
Second Violin _____
Viola _____
Cello _____
Bass _____

Allegro Orchestra

Please list numbers of students participating by orchestra and section

First Violin _____
Second Violin _____
Viola _____
Cello _____
Bass _____

This is a 2 page form – Don't forget to fill out page 2 below

