

Illinois Grade School Music Association

Northern Division

DISTRICT IX CONTEST ENTRY FORM

(PLEASE TYPE OR PRINT LEGIBLY)

Clinic: Y / N
(Please circle)

PLEASE CIRCLE: BAND JAZZ ORCHESTRA CHOIR SHOW/SWING CHOIR

School Name

IGSMA
District

No. of Students in
Performing Group

Grade Level(s) of
Students in Group

School Street Address

Choir Type: ___ Treble ___ Boys ___ Mixed

School City, State and Zip Code

Name of Performing Group

School Telephone with Area Code

Do you share students on contest day? ___

Which groups share? _____

CONTEST SELECTIONS WILL BE CONFIRMED BY CONTEST HOSTS—TBAs ARE ACCEPTABLE

Title

Composer

Arranger

Title

Composer

Arranger

Title

Composer

Arranger

Check any that apply:

_____ Our ensemble does not wish to receive a plaque if we earn a Division I rating.

_____ Our ensemble wishes to perform for comments only.

I hereby certify that this group consists of bona fide students of the above named school and will comply with the rules and regulations of the ILLINOIS GRADE SCHOOL MUSIC ASSOCIATION, NORTHERN DIVISION, as set forth in the Constitution.

Director's Name (PRINT)

Director's E-Mail Address

Home: Number and Street

Director's Fax Number

Home: City/State

Zip

Home: Telephone with Area Code

Administrator's Signature

Mail to Sarah Corkins, Hinckley-Big Rock Middle School, 47W984 Route 30, Big Rock, IL 60511 by December 15.

Or fax to Sarah Corkins- 630-556-4181

Must be postmarked by 12/15/2010, otherwise a \$100 late fee may be imposed