

March, 2016

Site TBA by August 2015

2016 Ann C. Roberts Orchestra Festival

Director:		Office Phone:	Cell Phone:	
Home Address:		City:	State:	Zip:
Name of School:			Home Phone:	
Mailing Address:	School District:			
City:			State:	Zip:
Best time to call:	E-mail:			
Check Classification and enter (#) number of students in group(s): String Orchestra Full Orchestra				
	Elementary	Beginners - 1st Year	_	
	Sub-NV Non-Varsity		Varsity	
Circle preferred Time/Day: Friday - AM or PM Saturday - AM or PM				1
F	REREGISTRATION FEE O	F \$150.00 FOR EACH GROUP	MUST ACCOMPANY THI	S FORM