ACCORDION ASSOCIATION OF CALGARY ANNUAL MUSIC FESTIVAL ENTRY FORM

COMPETITOR INFORMAT	rion:		
Name			
Address ————			
City	Province		
Postal Code	Telephone		
E-mail Age (as of June 21, 2025)			
Teacher(s)			
Name			
Grade Level/Book studyi	ng as of June 21, 2025		
information is outstandin		tached to this form and entry f igible to compete. All festival f scheduling.	
Class Number	Name of Selection	Arranger Composer	Fee (\$)
•	ase Indicate The Name of Yo		
Duet Class Number		Name of Duet Partner	

For Group Entries Please Attach A Separate Sheet Listing The Name of Each Participant And Their Level Of Study

ENTRY DEADLINE: MUST BE RECEIVED BY MAY 25, 2025