

Ballet Division Entry Form (Pink)
2010 MUSICFEST NORTHWEST - May 9 thru 14
Entry Postmark Deadline March 10, 2010

Entry #	_____
Date Rec'd	_____
Entered By	_____

(for office use only)

PLEASE TYPE OR PRINT

- A separate form must be completed for EACH class entered and sent to the Entry Secretary:
 Mrs. Eugene F Bauer, c/o Musicfest Northwest
 315 W Mission #18
 Spokane, WA 99201
 Telephone: (509) 327-7674 or Office (509) 327-3455
- Make check or money order payable to Musicfest Northwest or MFNW
- A complete list of rules is printed in the Preliminary Bulletin and on our website: www.musicfestnorthwest.org
- **Double fee required for late entries - NO EXCEPTIONS!**

Last Name	First Name	Initial	Phone Number (area code)
Mailing Address	Apt Number	Date of Birth	School Grade
City	State or Province	Zip	School Name
Parent or Guardian Name	Parent Address (if different)	Email Address	

- **Do you have AP tests this year?** **Yes** **No** **If yes, day & time** _____

PLEASE NOTE

Complete ALL Boxes

Class Number You are Entering

Number of Ballet Classes per Week

Years of Study after Age 8


If you are in other classes, list the classes entered:	
Ballet	_____
Brass	_____
Flute	_____
Guitar	_____
Organ	_____
Piano	_____
Reed	_____
String	_____
Voice	_____

Class 1A - Selection of your choosing: _____

Class Entry Fee \$ _____

Surcharge, if applicable, \$10.00 \$ _____  • **REMEMBER:** Students of Non-Member Teachers add \$10.00 surcharge per class

Program(s) are \$10 each _____ • **CLASS 6:** List dancer information on the back side.

Membership (\$50.00 min) \$ _____  • Festival membership is encouraged, but not required. If you are making a contribution for membership, complete the membership information on the back side of this form.
 (membership includes 1 program)
TOTAL ENCLOSED \$ _____

 Name of Ballet School

Teacher Name	Address	City	State or Province	Zip	Phone
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For Class 6, list dancers

1 _____
Last Name First Name

2 _____
Last Name First Name

3 _____
Last Name First Name

4 _____
Last Name First Name

5 _____
Last Name First Name

6 _____
Last Name First Name

7 _____
Last Name First Name

8 _____
Last Name First Name

Festival Membership (Optional)

_____ For NEW and Renewing Members: Please print your name as you wish it to appear in the Program. Phone

_____ Address City State or Province Zip

Membership Categories:	
Festival Friend	\$50.00
Contributor	\$100.00
Sustainer	\$150.00
Benefactor	\$500.00
Patron	\$1,000.00
Underwriter	\$5,000.00+