NATIONAL MEMORIAL DAY CHORAL FESTIVAL

CHOIR REGISTRATION FORM

Official Name of Choir	
Name of Organization/School	
Street or P.O. Address	
City, State, Zip	
Organization/School Phone	Organization/School Fax
Choir Director's Name	
Home Address	. Tanna - Tank en my erk a endere de
Mobile Phone	Home Phone
Email Address	
Best time and place to call	Birthday (month/day)
Tour Coordinator's Name (if applicable)	
Home Address	
Mobile Phone	Home Phone
Email Address	
Best time and place to call	Birthday (month/day)
PARTICIE	PANT INFORMATION
Estimated number of singers who will be particip	pating:
Estimated total number of travelers (singers and	others):

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