

**NEBRASKA MUSIC TEACHERS ASSOCIATION  
STATE FESTIVAL**

**PARTICIPATION INFORMATION SHEET**

**Teachers:** Send this completed form, your student entry blanks and one check to cover the total fees for all students entering from your studio to the State Festival Chair no later than the postmark deadline.

**Teacher's name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_  
(include area code)

• **Student participation:**

# of Level 1A entries: \_\_\_\_\_ # of Level 1B entries: \_\_\_\_\_ # of Level 2A entries: \_\_\_\_\_

# of Level 2B entries: \_\_\_\_\_ # of Level 3A entries: \_\_\_\_\_ # of Level 3B entries: \_\_\_\_\_

# of Level 4A entries: \_\_\_\_\_ # of Level 4B entries: \_\_\_\_\_ # of Ensemble entries: \_\_\_\_\_

**Total** Solo entries \_\_\_\_\_ x \$18.00 = \_\_\_\_\_

**Total** Ensemble entries \_\_\_\_\_ x \$24.00 = \_\_\_\_\_

(Check number: \_\_\_\_\_) **Total \$\$ enclosed:** \_\_\_\_\_

• **Teacher participation:**

Time available  
(please circle all possible)

Sat. Early A.M.

Sat. Mid A.M.

Sat. Late A.M.

Sat. Early P.M.

Sat. Mid P.M.

Sat. Late P.M.

Sun. Early P.M.

Sun. Mid P.M.

Sun. Late P.M.

Duty preferred

Ear training Room monitor \_\_\_\_\_

Theory Exam Room monitor \_\_\_\_\_

Theory Grader \_\_\_\_\_

Office Worker \_\_\_\_\_

Wherever Needed \_\_\_\_\_

Competition Monitor (Saturday only) \_\_\_\_\_

• **Parent participation:**

List the names of Parent Volunteers with their phone numbers: (include area code)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Please list at least 1 – more will be accepted.)