**Great Composers’ Day – 2018 - Registration Form**

**Name of individual (or, if a group submission, denote name of the teacher here):**

**Phone #: 770-493-6534 Contact Email Address: camaga.atlanta@gmail.com**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name | Vocal (V) or  Instrument  (Veena,  Violin, Flute, Mridangam) etc) | Age  < 16 or  *>16* | Participating as:  Individual  (I), or  Group (G) | Member (M)  or  Non-Member  (NM) | If a member of  CAMAGA,   name in which the  membership is  registered. |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |