

Austin District Music Teachers Association MASTER LIST FOR EVENTS

Teacher #

Teacher _____ Phone _____

Address _____ Email _____

City/Zip _____ Event _____

of Students _____ Amount Enclosed \$ _____

➔ Teachers who enter students are required to monitor. Indicate preference of time to monitor:

MORNING: early ☐ late ☐
AFTERNOON: early ☐ late ☐

Critique Sheets (check one): Teacher Pickup _____ Drop off at Strait Music _____ Mail _____

Student/Parent Pickup _____ Student/Parent Signature upon receipt of critiques _____

Students Listed Alphabetically Last Name, First Name	Playing Duration	May Request Early or Late <u>am or pm</u>	For Festival Chairman's use ONLY	
			Judge #	Time
1.				
2.				
3.				
4.				
5.				
6.				
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18.				
19.				
20.				