

CHAMBER MUSIC ENCOUNTERS # 16043

2018-2019 REGISTRATION FORM

REGISTRATION AND PAYMENT DEADLINE MARCH 22, 2019.

Please type or print clearly. Mail form and check for registration fee to VPA External Programs, College of Visual and Performing Arts, NIU, 1425 W. Lincoln Hwy., DeKalb, IL 60115. Contact the Office of External Programs, College of Visual and Performing Arts, at (815) 753-1450 or e-mail Kristin Sherman at ksherman2@niu.edu with questions.

Director's Name Full Name of Ensemble

School Name and Address

City, State, Zip

School Phone School Fax Number Director's Phone Director's email address

No. of students in ensemble _____

Accommodations: Guest of the event will stay in the Holmes Student Center Hotel on campus within walking distance of the Music Building. Students will be housed 2 per room and adults 1 per room. Please list the names and genders of your party so we can arrange the rooms.

Adults	Students
1. M / F _____	1. M / F _____
2. M / F _____	2. M / F _____
3. M / F _____	3. M / F _____
	4. M / F _____
	5. M / F _____

Dietary Restrictions: Please list any dietary restrictions for your party.

Registration Fee:

*Make checks payable to Northern Illinois University and mail with the registration form to the address above by March 31.

Directors and Chaperones \$80 Each	
Students \$120 Each	
Total:	

REPERTOIRE: Please list your repertoire for the final concert and include the timing.

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NOTE: Please be sure to bring original scores with you to the event. Thank You!

If requesting a PRO FORMA invoice to use for payment, please provide recipient information:

Name of Pro Forma invoice recipient

Billing Address

Phone Number

Email address