

2009 SOUTH CAROLINA REGIONAL CHORUS

Registration Form

Please read the Regional Chorus guidelines before filling in this form. All relevant spaces must be filled in; otherwise, the request will be invalid.

Please Type:

SCHOOL _____

SCHOOL ADDRESS _____

SCHOOL DIRECTOR _____

SCHOOL PHONE _____ HOME PHONE _____

E-MAIL ADDRESS _____

MENC# _____ EXPIRATION DATE _____

A PHOTOCOPY OF MENC MEMBERSHIP CARD MUST BE ATTACHED

STUDENT'S NAME	VOICE PART
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____

Registration Fee: \$10.00 per student (non-refundable). Include one check for the full amount payable to SCMEA CHORAL DIVISION.

Registration Deadlines: Upper/Lower Regions- Jan. 7, 2009

Central Region – Jan. 14, 2009

Mail all fees, roster, and MENC information to:

Dale Roth
Clinton High School
N. Adair Street
Clinton, SC 29325
ddroth@laurens56.k12.sc.us

Region attending:

____ Central (Clinton)
____ Upper (Easley)
____ Lower (Lake Marion)