

# REGISTRATION

School Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ e-mail \_\_\_\_\_

Director \_\_\_\_\_

Ensemble Name \_\_\_\_\_

Ensemble:  Instrumental Combo     Big Band     Vocal

School:  Jr. High/Middle School     High School

Fee: \$85 per ensemble, payable to Casper College

### PERFORMANCE DAY AND TIME PREFERENCE

The Jazz Festival coordinator strives to accommodate all requests. Scheduling will be on a first-come, first-served basis, with consideration given to ensembles traveling from greater distances.

Tuesday, February 9                      Time: \_\_\_\_\_

Wednesday, February 10                  Time: \_\_\_\_\_

#### PAYMENT INFORMATION

	Quantity	Cost	Total
Registration:	_____	\$85	_____

Payment by: \_\_\_\_\_ Grand total: \_\_\_\_\_

School voucher

School purchase order

Credit card:     Mastercard     Visa     Discover

Card number: \_\_\_\_\_ Exp. date: \_\_\_\_\_

**Registration Deadline: December 18, 2009**

*Please return one form for each ensemble  
(duplicate this form as needed)  
along with payment (school voucher, school  
purchase orders, or credit card)*

to

Kathy Coe

Casper College Kinser Jazz Festival

125 College Drive

Casper, WY 82601

307-268-2606