

FOLSOM JAZZ FESTIVAL - 29th Annual

Saturday, January 27, 2018

2017 - 2018 APPLICATION

School Name _____

School Address _____ City _____ Zip _____

NOTE: Please list each Director and the group(s) they will be directing.

Director's Name (1) _____

GROUP NAME: _____

Director's Name (2) _____

GROUP NAME: _____

(For additional Directors and or additional groups, please list EACH on other side)

Director's (1) Cell Phone # _____ School Phone # _____

E-mail Address (required): _____

Director's (2) Cell Phone # _____ School Phone # _____

E-mail Address (required): _____

All correspondence will be Emailed to each Director listed

**School Enrollment number as of April 1, 2016 _____ (required)

If you have a preference for performance time, please indicate here: _____

How many groups are you bringing?

	Jazz Band	Jazz Choir	Combo	FEE SCHEDULE	
# of High School Groups				1 Group -	\$300
# of Middle School Groups				2 Groups -	\$550
# of Elementary Groups				3 Groups -	\$800
(Example)	2	1	1	4 Groups -	\$1,000

Total Groups: _____ Total Amount Enclosed \$ _____

Applications received first - with check - will receive highest priority.

Performance times are based on the order applications are received.

PLEASE MAIL YOUR APPLICATION AND CHECK TO:

FOLSOM HIGH SCHOOL

C/O Curtis Gaesser, Music Department
1655 Iron Point Road, Folsom, CA 95630

Check made payable to: **FOLSOM HIGH SCHOOL MUSIC BOOSTERS**

NOTE: We cannot offer refunds or waivers for cancellations

Check our website for scheduling information: www.FolsomMusic.org

Questions? Call Curtis Gaesser (916) 985-3103 – FAX (916) 985-3307

FOR OFFICE USE ONLY

DATE REC'D: ____/____/____ AMT: \$____ CH #____ CONF SENT: ____/____/____ APP #____