

TEACHER INFORMATION FORM (Please print all information.)

Name of Teacher _____

(As you want it to appear in the program.)

Address _____

P.O. Box/Street

Town/City

Zip code

Phone _____ (Please include area code.)

Email _____

(If you wish to be notified of performance times via email.)

How many entries do you have?

Piano _____ Voice _____ Strings _____

Total fees enclosed: (Complete one of the following.)

1. OhioMTA Member:

Number of participants _____ times \$15.00 = \$ _____

2. Non-member:

Number of participants _____ times \$16.00
Plus the \$20.00 teacher fee = \$ _____

Checklist for all teachers:

When mailing the registration information, did you include:

_____ A separate STUDENT ENTRY FORM for each performer?

_____ This TEACHER INFORMATION FORM?

_____ One check made payable to OhioMTA Middle West?