

Region XXI Middle School Solo and Ensemble Schedule Request Form

Return this before Christmas Holidays begin

Please schedule events for _____ Middle School.

If possible, schedule my students on: Friday _____ Saturday _____ (AM or PM)
I understand I may not be scheduled when I would prefer as there are many factors involved.

I understand that I will need to provide at least one accompanist for every 25-30 soloists that require an accompaniment.

Director's signature: _____

Director's Cell Phone Number: _____

Director's Office Number: _____

Director's Email Address: _____

The best time of day to contact me is: _____

I will have _____ accompanists for my students.

Below, please provide any special scheduling instructions for the contest chair.

Return to Bene Davis: davisb@lisdeagles.net

Fax: 903-881-4049