

LOL District Quartet Clinic Registration Form
Land O' Lakes Fall Convention
October 13-14, 2023

Quartet Name _____

Chapter Affiliation _____

Names Tenor _____

 Lead _____

 Baritone _____

 Bass _____

Type of Quartet

 Male _____

 Female _____

 Mixed _____

Experience

 Less than 1 year _____

 1 to 2 years _____

 More than 2 years _____

Background (check all that apply)

 Singing Valentines _____

 Contest quartet _____

 First time together _____

 Social quartet only _____

 Chapter quartet _____

 Youth/Next Gen _____

 Chapter shows _____

 Seniors quartet _____

 Community events _____

 Fun Quartet only _____

 Other Experience - explain

What 2 songs has your quartet prepared for this clinic?

*Registration for the Quartet Clinic must be **completed by September 15th**

Please send form to: Mike Lietke mikelietke@hotmail.com