

South Carolina Federation of Music Clubs

2024-2025 Junior Club and Senior Counselor Dues DEADLINE – November 1, 2024

*Junior entrants and teachers must be members of the National Federation of Music Clubs.
Teachers may not submit entrants whom they do not personally teach. (2003 NFMC Festivals Bulletin)*

• Junior Club Information (students)

| | |
|-------------------------------------|---|
| Club Name _____ | FOR STATE TREASURER'S USE |
| Counselor's / Teacher's Name _____ | Check No. _____ |
| Address _____ | Date _____ |
| _____ Zip _____ | Deposit _____ |
| Telephone _____ Email _____ | ~ ~ ~ ~ ~ |
| Total Number of Students* _____ | Dues for 1-16 students: \$ <u>38</u> |
| List all students on page 2. | \$2.00 each for each additional student: \$ _____ |
| ~ ~ ~ ~ ~ | |

DO NOT OMIT FILLING OUT THIS SECTION!

• Senior Counselor | Teacher Affiliation Information (teachers)

*If not a member of an organized Senior Club, counselor / teacher must join as a
"Senior Individual" member!*

| | |
|--|----------------|
| _____ I am a member of a SCFMC Senior Club and my dues have been paid. | |
| Senior Club Name _____ | \$ <u>Paid</u> |
| _____ I am NOT a member of a SCFMC Senior Club and am joining as a "Senior Individual" member: | \$ <u>70</u> |

Club Name _____

Counselor's / Teacher's Name _____

Address _____

_____ Zip _____

Telephone _____ Email _____

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• Junior Keynotes Magazine*

*NOTE: The lead Club Counselor/Teacher receives one (1) complimentary subscription to
Junior Keynotes magazine.*

Additional teachers entering students in Festival must subscribe to Junior Keynotes magazine.
(The counselor and all teachers must be listed on page 2.)*

*Number of counselors and/or teachers subscribing (less complimentary copy) _____ x \$6 each: \$ _____

~ ~ ~ ~ ~

• Subtotal

SUBTOTAL: \$ _____

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• LATE Fees and Total Due

South Carolina Federation of Music Clubs **\$10 LATE FEE** if paid after 11/1/24: \$ _____

National Federation of Music Clubs **\$10 LATE FEE** if paid after 12/1/24: \$ _____

Check for all above made payable to "SCFMC" — **TOTAL:** \$ _____

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Important Notes:

*Any check returned for insufficient funds or other will incur a \$20 service charge due to SCFMC. (SCFMC
Board of Directors, May 14, 2004) Fill in this form and mail by **November 1, 2024** to: Bill Cooper, SCFMC
Treasurer*

P.O. Box 400

Enoree, SC 29335

(864) 969-2707 • scfmctreasurer@gmail.com

If you have any questions, please contact the SCFMC Treasurer.

• Personnel Information

Lead Counselor/Teacher

1. _____
(Receives complimentary *Junior Keynotes* subscription.)

Additional Counselor(s) | Teacher(s)

(These counselors | teachers must be subscribed at \$6 each [page 1] to *Junior Keynotes* magazine. **Please provide a Word doc or PDF with their addresses.**)

List LAST name, FIRST name in alphabetical order.

2. _____
3. _____
4. _____
5. _____
6. _____

16. _____

17. _____

18. _____

19. _____

20. _____

21. _____

22. _____

23. _____

Student(s)

List LAST name, FIRST name in alphabetical order.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____
15. _____

24. _____

25. _____

26. _____

27. _____

28. _____

29. _____

30. _____

31. _____

32. _____

33. _____

34. _____

35. _____

36. _____

37. _____

38. _____

39. _____

40. _____