

Upstate Fall Handbell Festive-Bell Registration Form

Name _____

Church/Organization _____

Director's Name _____

Address _____

City, State, Zip _____

Phone _____

E-mail _____

HMA membership # _____

Orphan Ringer _____ Group _____

Mass Ringing _____ Zero to Hero _____

Willing to host orphans? _____

Number of octaves you will bring: _____

Table footage needed _____ *(Complete even if bringing your own tables)*

Will you bring your tables or rent? _____

Special Dietary Needs: _____

Attending Friday Night session? _____

Payment Information

Early Bird HMA # of ringers: _____ x \$35=_____

Early Bird non-member # of ringers: _____ x \$40=_____

After Aug. 15, 2019

HMA member # of ringers: _____ x \$40=_____

Non-member # ringers: _____ x \$45=_____

Zero to Hero # ringers _____ x \$10 (for music) _____

8' Tables Requested: _____ x \$10=_____

Total fees due: \$ _____

Click [HERE](#) to pay. Please email pam.spirko@gmail.com the registration form and to notify of payment. Or you can mail this form with payment to Carolina Bronze, % Pam Spirko, 259 Chickadee Trail, Easley, SC 29642.