

# 100 Mile Festival of the Arts

## GROUP ENTRY FORM (6 – 9 or 20 or more Performers)

Form Checked

- You are responsible for reading the rules. TBA is not acceptable under Selection Title
- For each ensemble, list members' names and birth dates.
- The person named at the top of the form is responsible for ensuring that all individual fees are paid and will be the contact person to the Festival Committee.

Please photocopy this form as required, using these pre-assigned colours for each discipline:  
Speech Arts – blue      Vocal – white      Piano – pink      Instrumental – yellow

NAME OF GROUP: \_\_\_\_\_ Home Phone: \_\_\_\_\_

How many members in group? \_\_\_\_\_ Teacher's Name: \_\_\_\_\_

School & Grade: (if applicable) \_\_\_\_\_

Performance grade level (if applicable) \_\_\_\_\_

Class Name: \_\_\_\_\_ Class Code: \_\_\_\_\_ **Fee** \_\_\_\_\_

Selection Title: \_\_\_\_\_

Composer: \_\_\_\_\_ Performance Time: \_\_\_\_\_

2<sup>nd</sup> Selection (if any) \_\_\_\_\_

Composer: \_\_\_\_\_ Performance Time: \_\_\_\_\_

Class Name: \_\_\_\_\_ Class Code: \_\_\_\_\_

Selection Title: \_\_\_\_\_

Composer: \_\_\_\_\_ Performance Time: \_\_\_\_\_

2<sup>nd</sup> Selection (if any) \_\_\_\_\_

Composer: \_\_\_\_\_ Performance Time: \_\_\_\_\_

Class Name: \_\_\_\_\_ Class Code: \_\_\_\_\_

Selection Title: \_\_\_\_\_

Composer: \_\_\_\_\_ Performance Time: \_\_\_\_\_

2<sup>nd</sup> Selection (if any) \_\_\_\_\_

Composer: \_\_\_\_\_ Performance Time: \_\_\_\_\_

**Total Fee** \$\_\_\_\_\_

Registration Day is Saturday, February 22, 2025 from 10 am to 2 pm at Parkside Centre (401 Cedar