

# HONOR CLINIC REGISTRATION

## NCNMMEA

Please indicate the following instrumentation and/or voicing you will bring on the attached form and return it to:

**District Honor Clinic – Santa Fe - November 19 & 20, 2004**

**DEADLINE: October 19, 2004**

Attn: Don Gerheart, Financial Administrator  
 93 Mimbres Dr.  
 Los Alamos, NM 87544

<b>BANDS</b>			<b>CHOIR</b>		
	<b>Middle School</b>	<b>High School</b>		<b>Mixed</b>	<b>Treble</b>
1 <sup>st</sup> Flute	_____	_____	Soprano	_____	Soprano I _____
2 <sup>nd</sup> Flute	_____	_____	Alto	_____	Soprano II _____
Oboe	_____	_____	Tenor	_____	Alto _____
Bb Sop. Clarinet			Bass/Bar.	_____	
1 <sup>st</sup>	_____	_____			
2 <sup>nd</sup>	_____	_____			
3 <sup>rd</sup>	_____	_____			
Alto Clarinet	_____	_____	<b>SCHOOL:</b>	_____	
Bass Clarinet	_____	_____	<b>SCHOOL PHONE:</b>	_____	
CB Clarinet	_____	_____	<b>DIRECTOR:</b>	_____	
Bassoon	_____	_____	<b>TOTAL # OF PARTICIPANTS:</b>	_____	
Eb Alto Sax			<b>TOTAL FEES REMITTED:</b>	_____ @ \$15.00 each	
1 <sup>st</sup>	_____	_____	<b>METHOD OF PAYMENT:</b>		
2 <sup>nd</sup>	_____	_____	<b>PO#</b>	_____	<b>CHECK#</b> _____
Tenor Sax	_____	_____			
Baritone Sax	_____	_____			
Cornet/Trumpet					
1 <sup>st</sup>	_____	_____			
2 <sup>nd</sup>	_____	_____			
3 <sup>rd</sup>	_____	_____			
French Horn					
1 <sup>st</sup>	_____	_____			
2 <sup>nd</sup>	_____	_____			
3 <sup>rd</sup>	_____	_____			
4 <sup>th</sup>	_____	_____			
Trombone					
1 <sup>st</sup>	_____	_____			
2 <sup>nd</sup>	_____	_____			
3 <sup>rd</sup>	_____	_____			
Baritone TC	_____	_____			
Baritone BC	_____	_____			
Tuba	_____	_____			
Percussion	_____	_____			