

**Metamora Concert Band Festival**  
**Saturday, February 21, 2009**

*Please complete a separate application for each band you wish to enter*

**Band name:** \_\_\_\_\_

**School name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip code:** \_\_\_\_\_

**School phone:** (\_\_\_\_) \_\_\_\_\_ **Fax no:** (\_\_\_\_) \_\_\_\_\_

**Email:** \_\_\_\_\_

**Director(s) name(s):** \_\_\_\_\_

**Entry fee of \$250 or \$200 for each additional entry is enclosed:**

**YES** \_\_\_\_\_ **NO** \_\_\_\_\_

PLEASE MAKE CHECKS PAYABLE TO: MTHS FINE ARTS BOOSTERS

**Director's signature:** \_\_\_\_\_

**Please return to:** Wally Parks  
Metamora Township High School  
P.O. Box 109  
Metamora, IL 61548  
(309) 367-4151 x570 *or fax to:* (309) 367-4154