



**CLARINET CORNUCOPIA  
REGISTRATION FORM (#10662)**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Day Phone

\_\_\_\_\_  
E-Mail Address

\_\_\_\_\_  
Organization or School

I am a:

- high school student in grade \_\_\_\_\_       college student  
 professional teacher or player       amateur player  
 vendor

**Clarinet Cornucopia Choir**

\_\_\_\_\_ I plan to be in the Clarinet Cornucopia Choir.

I would like to play :     B-flat Soprano     Bassett Horn  
     Alto     Bass     E-flat Contra     B-flat

**Registration Information**

	Early Bird	After Dec. 20	Totals
_____ Individual Registration	\$50	\$61	_____
_____ Group Registration (5 or more)	\$40	\$51	_____
<small>Each person must submit a form.</small>			
_____ Vendor	\$70	\$70	_____

**Optional Extras**

\_\_\_\_\_ Box lunch      \$ 8    \$ 8      \_\_\_\_\_  
 specify type and quantity:  
   \_\_\_ turkey    \_\_\_ cheese

\_\_\_\_\_ Clarinet Duet Competition (per person)      \$ 5    \$ 5      \_\_\_\_\_  
 Specify category:  
   \_\_\_ High School    \_\_\_ Open

Other performer's name: \_\_\_\_\_

Duet's name ( if applicable): \_\_\_\_\_

**Total Enclosed** \_\_\_\_\_

**Credit Card Information**

\_\_\_ Mastercard    \_\_\_ Visa    \_\_\_ Discover    \_\_\_ AmExpress

\_\_\_\_\_  
Credit Card Number Expiration Date

\_\_\_\_\_  
Name on Card

Return this form and payment to: External Programs, College of Visual and Performing Arts, Northern Illinois University, DeKalb, IL 60115 or fax credit card payments only to (815) 753-8372. For more information, call (815) 753-1450 or see the website at [www.cornucopia.niu.edu](http://www.cornucopia.niu.edu)

**FINNISH  
MODERN**

**January 23, 2010**