

MTAC ____ RECITAL & ____ Festival FORM
(please check one)

Date of event: _____

Time of event: _____

Place of event: _____

Name of piece	Composer	Level	Length
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Student's Name: _____ Age: _____

Teacher's Name: _____ Phone: _____ email: _____

Mail to: Marilyn Wilson
802 Goodwin Ave
Penngrove, CA 94951

Entry fee: \$8

No later than 9 days before the event! No Exceptions!
No jeans, shorts, miniskirts, bare midriffs, sloppy tennis shoes.
Please inform students/families.