## 4-H MUSIC FESTIVAL ENTRY FORM Mon., March 19 - 6 PM - Crivitz High School

Name(s):	Club:			
Phone of Contact Person:				
Performing (include name of selection,	whether a solo, duet,	group, etc., and th	ne name of the	e person(s) involved):
□ <i>DANCE</i> Title of Performance:	□ Group	□ Ensemble	□ Solo	□ Cloverbud
□ <i>INSTRUMENTAL</i> Title of Performance:	□ Group	□ Ensemble	□ Solo	□ Cloverbud
□ <i>VOICE</i> Title of Performance:	□ Group	□ Ensemble	□ Solo	□ Cloverbud

Return form to: 4-H OFFICE, 1926 HALL AVENUE, MARINETTE WI 54143