

Region 25 Education Coordinators Faculty Visit Request Form
(First come.....First Served!)

Chorus Name: _____ Today's Date: _____

Chorus Mailing Address: _____

Chorus Rehearsal Day/Time/Location: _____

Director: _____ Phone: _____

Email: _____

Check type of visit you are requesting:

Rehearsal Night (Which night of the week)?

Weekend, to include

Friday night

Saturday AM

Saturday PM

Date Preferences:

1) _____

2) _____

3) _____

Please provide specific input about your chapter's needs, i.e. vocal production, coaching, choreography, PVI's, educational classes, section leader training, etc. A faculty member will be assigned according to availability and expertise.

Please note: The cost to the chorus is \$100 per visit plus lodging and meals as needed for the faculty member. The remainder of the cost will be borne by International and/or Region 25 **IF 80% of your members attend and all four parts are represented.** Choruses not meeting the attendance requirement will be billed for the entire cost of the visit (transportation and per diem).

Return this form by June 15 to: **Marilyn Dickey**
MarDickey@aol.com
6812 - 1st Street
Lubbock, TX 79416