

NATS Arkansas Chapter TEACHER REGISTRATION FORM

By completing this application, I certify that I have paid my national dues for this calendar year.

PERSONAL INFORMATION

Last Name	First Name	
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	
Address		
<input style="width: 100%;" type="text"/>		
City	State	Zip
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/> - <input style="width: 100%;" type="text"/>
Univ/Coll/HS	Private Studio	Emeritus
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Telephone (Primary)	(Secondary)	
<input style="width: 100%;" type="text"/> - <input style="width: 100%;" type="text"/> - <input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/> - <input style="width: 100%;" type="text"/> - <input style="width: 100%;" type="text"/>	
Fax	Email	
<input style="width: 100%;" type="text"/> - <input style="width: 100%;" type="text"/> - <input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	

FEES

Teacher Registration Fee			\$50.00
includes Fri luncheon and Sat box lunch			
Student Entry Fees	_____ @	\$15.00	= _____
Total:			_____

Make one check for this total payable to NATS Student Auditions

JUDGING COMMITMENT

As a NATS member, I am expected to judge unless a waiver is granted. It is assumed that I will arrive in time to judge the preliminary round opening session.

<input type="checkbox"/>	I will be available to judge at the opening session.
<input type="checkbox"/>	I am qualified and willing to judge musical theater and accept belt as a legitimate technique.
<input type="checkbox"/>	I am registering for the conference in order to show support for NATS but do not plan to attend the conference or send students to audition.
<input type="checkbox"/>	I petition for a judging waiver for the following time and reason: _____

YOU MUST OBSERVE THE JANUARY 30 POSTMARK DEADLINE!

Mail this form along with all Student Registration forms and your **ONE CHECK** to:
Nita Herrick Colpitts
86 Sturgeon Circle
Russellville, AR 72802-7296