

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

Address

City

State

Zip

 -

Univ/Coll/HS

Private Studio

Emeritus

Telephone (Primary)

 - -

(Secondary)

 - -

Fax

 - -

Email

FEES

Teacher Registration Fee

includes Fri luncheon and Sat box lunch

\$40.00

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.

- _____ I will be available to judge at the opening session.
- _____ I am qualified and willing to judge musical theater and accept belt as a legitimate technique.
- _____ 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.
- _____ I petition for a judging waiver for the following time and reason: _____
- _____
- _____
- _____

YOU MUST OBSERVE THE JANUARY 29 POSTMARK DEADLINE!

Mail this form along with all Student Registration forms and your **ONE CHECK** to:

Nita Herrick
86 Sturgeon Circle
Russellville, AR 72802-7296