

## April 23 - 26, 2019 Kansas City Kansas Community College

Please complete one form per group.

Name of School:			
Address:	ss: Phone:		
City:	State:	Zip:	
Director's Name:	Email:		
Group Name:			
Date preference:   Tues (Vocal J	day, 4/23 🗖 Wednesday,	4/24	25 🗖 Friday, 4/26
Type of performance gro	up: 🗖 Jazz Choir (Tuesda	ay Only) 🗖 Jazz Ensemb	le 🗖 Jazz Combo
Please select performance ca	tegory:		
•	· -	iic	ay if space available)
<ul> <li>Judging based on list</li> </ul>	ive) – <b>Thursday Only</b> ed jazz bands (approved ro of criteria including stylist warded a trophy and invi	tic accuracy and authent	cicity
	- Tuesday, Wednesday, & with little experience or o will be inspirational and fo	unconventional instrume	

The entry fee is \$250 for Heritage groups and \$200 for Summit/Tyro groups.

Registration is not complete until payment is received. Please return this form by March 1, 2019 to reserve a slot. Registrations received after March 1 will be accepted on a space available basis.

Please make check payable to the Kansas City Jazz Summit and return to:

Jim Mair Kansas City Jazz Summit 7250 State Avenue Kansas City, Kansas 66112