

Registration Form: Sprachfest 2010 at UMBC

Name of High School

County

Name of Contact Person

Address

City, ZIP

E-Mail Address:

Number of Persons attending, in all:

Number of Students: Number of Teachers/Chaperones:

Estimated Time of Arrival: Time School Needs to Leave:

1. Performances

	Number of Students	Level (I, II, III, IV, AP)	Equipment Needed (CD-Player, LCD projection, Overhead, etc.)
Skit/Play	<input type="text"/>	<input type="text"/>	<input type="text"/>
Music/Song	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dance	<input type="text"/>	<input type="text"/>	<input type="text"/>
Recital (Poetry/Speech)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other (describe below)	<input type="text"/>	<input type="text"/>	<input type="text"/>

2. Projects

	Number of Students	Level (I, II, III, IV, AP)
Poster	<input type="text"/>	<input type="text"/>
Model/Sculpture	<input type="text"/>	<input type="text"/>
Video/Digital Production	<input type="text"/>	<input type="text"/>
Other (describe below)	<input type="text"/>	<input type="text"/>

Comments: