



37th Annual
 IWU Jazz Festival
 Saturday, January 21, 2012

Illinois Wesleyan University
School of Music
 Dr. Tim Pitchford
 Presser Hall • PO Box 2900
 Bloomington, IL 61701
 (309) 556-3269 • Fax (309) 556-3121

Name of School:

Ensemble Name:

Address:

City, State, and Zip:

Director:

E-mail:

Telephone:

Fax:

Ensemble Type:

Big Band (9 musicians min.)

Combo (8 musicians max.)

Entry Fee: \$175.00/Big Band; \$125.00/Additional Band; --- \$125.00/Combo
Entry Deadline is Friday, January 6, 2012 or until filled

Big Band:	@\$175.00	=		\$
Additional Big Band:	@\$125.00 each	=		\$
Combos:	@\$125.00 each	=		\$
		Total		\$

Check Enclosed OR Purchase Order Number _____

Mail application and check to:

**Dr. Tim Pitchford • Illinois Wesleyan University • School of Music • PO Box 2900 •
 Bloomington, IL 61701**

- All checks must be received by Friday, January 6, 2012.
- Make checks payable to **Illinois Wesleyan University**
 - Bands that cancel will NOT receive a refund.

Director's Signature _____ Date _____

(Signature not necessary if sent electronically)