## Tennessee Federation of Music Clubs

## Plan for Junior Festival

City			Date of Festival	
Name(s) of Festival C	Chairman _			
Address				
,	(Street)		(City)	(Zip Code)
Phone Number(s)	( )		( )	
E-mail Address:				<u> </u>
Location (School or B	suilding) of F	estival		
Types of Instruments				
Note: Make 3 copie	es of this form.	Send two to the State Fe	stival Accountant and keep	one for your records.
	Approved by	/		
Events Plann	ned	No. of Entrants	Students or Group Fe	e Event Total
				<del></del>
				_
				_
			Total Fees Expected	d \$
		ount Balance from P		\$
Subtrac		Add Total Fees Expended Have to Have the Have to Have the Have to Have the H		\$ \$ \$
Capitao	· =	•	Page 2 Worksheet)	<del>. *</del>
	Accou	nt Balanced Expecte	d After Festival	\$