



## Registration Form-17<sup>th</sup> Annual NACJF-2006

Hotel and workshop registration forms will be sent to you upon receipt of your conference registration.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

DAY PHONE( ) \_\_\_\_\_

EVENING PHONE( ) \_\_\_\_\_

E-MAIL \_\_\_\_\_

I prefer to receive Festival-related correspondence via  E-mail  Snail Mail

Circle Voice Part: S A T B

Sight Reading Ability: (EXCELLENT) 1 2 3 4 5 (NON-READER)

1 Reads fluently and accurately. Sings on pitch and has had vocal training.

2 Can read well—will catch one's own mistake and correct it in two or three tries.

3 Can read music, but relies as much on hearing the part as on reading.

4 Uses the score for contour of the music, relies chiefly on hearing the part several times.

5 Cannot follow a musical score, relies only on hearing the part repeated many times.

Most recent Choral Affiliation: \_\_\_\_\_

Send me more information about earning academic credit from Gratz College.

Help me locate a roommate with whom to share a double room at the Festival.

### Registration Fees

	Before April 10, 2006	After April 10, 2006	
Full Participant	\$260	\$295	\$ _____
Observer	\$195	\$230	\$ _____
One Day Participant	\$120		\$ _____
Specify Day _____			

Registration Deadline: June 9, 2006

After this date, add a \$35 late administrative charge \$ \_\_\_\_\_

### 2006 Membership in the Zamir Choral Foundation

(Required of all attendees) Individual \$50 Z Family \$75 y \$ \_\_\_\_\_

y To support the work of the Zamir Choral Foundation I enclose my voluntary donation of \$ \_\_\_\_\_

I would like to order a Choral Festival T-shirt  
 XXL  XL  L  M  S

x \$15 each = \$ \_\_\_\_\_

**Total Amount Enclosed (US FUNDS ONLY)**

\$ \_\_\_\_\_

Make check payable to Zamir Choral Foundation

or charge to:  MasterCard  VISA

\_\_\_\_\_  
ACCOUNT NUMBER

\_\_\_\_\_  
SECURITY CODE

\_\_\_\_\_  
EXPIRATION DATE

\_\_\_\_\_  
SIGNATURE

Mail form and payment to:  
**North American Jewish Choral Festival**  
**c/o Zamir Choral Foundation**  
**120 Riverside Drive, Suite 1Y**  
**New York, NY 10024**

Or fax to: (212) 362-4662