



NHSDA Participant Information Form

The audition is Friday during the FDEO Conference.

PLEASE NOTE THAT THERE IS A MAXIMUM OF 10 PARTICIPANTS Per School

Please place a check-mark next to the events each student is participating in:

Student Name:	Audition	Honors Concert	Master Classes
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____
7. _____	_____	_____	_____
8. _____	_____	_____	_____
9. _____	_____	_____	_____
10. _____	_____	_____	_____
11. _____	_____	_____	_____
12. _____	_____	_____	_____
13. _____	_____	_____	_____
14. _____	_____	_____	_____
15. _____	_____	_____	_____

Total # of Participants _____ X \$10 = \$_____ Amount Enclosed: \$_____

Type of Payment: _____ *Make checks payable to FDEO

Deadline: September 14, 2012

Send payment to Daniel Lewis, FDEO Treasurer
8901 Southwest 79th Court Miami, FL 33156

Please MAIL completed form to Jennifer Simmers, FDEO/NHSDA, Chair,
Wellington High School 2101 Greenview Shores Blvd. Wellington, FL; 33414