

CHANGE OF REGIONAL BAND FESTIVAL REQUEST FORM

GENERAL INFORMATION

School Name: _____		Director: _____	
School Address: _____	City: _____	WV _____	Zip: _____
School Phone: _____	Home Phone: _____	Email: _____	
Principal Signature _____			

PROPOSED FESTIVAL CHANGE

CHANGE FROM		CHANGE TO	
Region: _____ Festival Director _____		Region: _____ Festival Director _____	
Festival Date: _____		Festival Date: _____	
Have you obtained approval from your festival director to attend a festival in another Region?		Have you obtained approval from the host festival director to attend his festival?	
Yes _____	No _____	Yes _____	No _____

FESTIVAL CHANGE REQUEST

[illegible]

SELECTION RECORD HISTORY

YEAR	SELECTION	COMPOSER	GRADE
This Year	1.		
	2.		
Last Year	1.		
	2.		
Year Prior	1.		
	2.		
Year Prior	1.		
	2.		

REQUEST STATUS

WVSSAC Office Use Only

Request Approved _____ Request Denied _____

Authorized Signature

Date