

# Tabor College Voice Festival and Competition

## Registration

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State/Zip \_\_\_\_\_

Current School \_\_\_\_\_

Voice Teacher \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

T-shirt Size: S    M    L    XL    2XL    3XL  
(circle size)

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**Performance Classification (check one)**

**Performance Category  
(check all that apply)**

HS Freshman/Sophomore   

HS Junior/Senior   

College Freshman/Sophomore   

Classical   

Musical Theater   

I will need a pianist provided.

I will bring my own pianist.

Name of Collaborative Pianist: \_\_\_\_\_

I would like to participate in a master class.

By registering and submitting the form for the second annual Tabor College Voice Festival and Competition, I agree to allow Tabor College to use images from the event for future promotional materials of the Department of Music.

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Register online at [www.@tabor.edu/voicefestival](http://www.@tabor.edu/voicefestival) or mail registration form and payment of \$15.00 to:

**Dr. Jen Stephenson, Event Coordinator**  
**Tabor College Department of Music**  
**400 S Jefferson Street**  
**Hillsboro KS 67063**