

FAIR ASSESSMENT FEE FORM

Quartet Name:_____

Contact Name:
Phone Number:
Email Address:
The Fair Assessment Fee is charged when a competing member* of a quartet or chorus chooses to NOT stay at the convention hotel. The current fee is \$50 per member.
Please list each of these members below.
Member Name:
No member owes a fair assessment fee
Please make checks payable to Midwest Harmony Region 3

Form and payment must be received by March 1, 2017

Please mail to:
Shelly Hughes
238 Bell Dr
Cary, IL 60013
skhsnoopy@comcast.net

^{*}Competing member is defined as any member appearing on the contest stage

⁻ includes swan songs and special performances