

Oregon Junior Bach Festival

Final Report 2010

For: _____
(District or Regional)

Chairperson's Name: _____

Date of Recital: _____

Total time of recital(s): _____

Adjudicator Information:

Name: _____

Address: _____

Telephone number: _____

E-Mail address: _____

Total number of students who entered:

Competitive Division: _____

Non-competitive Division: _____

Total amount (\$2.00 per student) sent to the OMTA State Treasurer: _____

Number of students who advanced to the next event: _____

Any additional comments:

Send this form, the Official Winner's List and a copy of your program, as soon as possible, to:

Gayle Bland, NCTM
19059 S. Leland Rd.
Oregon City OR 97045-8512
glbpiano2@live.com