



A Cappella Quartet Contest Entry form

Town, School or Chapter Represented: _____

QUARTET NAME: _____

LEAD _____

TENOR _____

BASS _____

BARI _____

Contact Name: _____

Contact Phone # (we prefer cellphones): _____

Contact's Email: _____

Make Checks Payable To: Chicago Metro Chorus
Send Payment and Registration

John Q Morris Quartet Contest
2220 W Carmen Ave Chicago, IL
Chicago, IL 60625

Or email to quinton1959@yahoo.com
cell phone 312-493-0055