

National Federation of Music Clubs (FFMC - adapted)

Junior

FESTIVAL TRANSFER INFORMATION

JR 3-1

Please send the following Festival information for:

Student: _____ State transferred from: _____

Area Festival: _____

Teacher's Name: _____ Phone: _____

Junior Music Club: _____ Email: _____

Year:	Event:	Class:	Rating:
Year:	Event:	Class:	Rating:
Year:	Event:	Class:	Rating:
Year:	Event:	Class:	Rating:
Year:	Event:	Class:	Rating:
Year:	Event:	Class:	Rating:
Year:	Event:	Class:	Rating:
Year:	Event:	Class:	Rating:
Year:	Event:	Class:	Rating:
Year:	Event:	Class:	Rating:
Total Number Gold Cup Points:		As of (Date):	
Number of Consecutive Superiors:		Signed:	

State Festival Cup Chair: _____

Phone: _____ Email: _____

Mail to festival chairman in new area of student participation

Name	Lisa Moore	Florida Federation of Music Clubs Festival Cup Chairman
Address:	802 Fox Valley Drive	omc.lisa.moore@gmail.com
City/State/Zip Code:	Longwood, FL 32779	

Area Festival/District: _____

Current teacher: _____

Phone: _____

Email: _____

Junior Club: _____