



## A Cappella Quartet Contest Entry form

Town, School or Chapter Represented: \_\_\_\_\_

QUARTET NAME: \_\_\_\_\_

Name \_\_\_\_\_ Vocal Part \_\_\_\_\_

Name \_\_\_\_\_ Vocal Part \_\_\_\_\_

Name \_\_\_\_\_ Vocal Part \_\_\_\_\_

Name \_\_\_\_\_ Vocal Part \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone # (we prefer cellphones): \_\_\_\_\_

Contact's Email: \_\_\_\_\_

A registration fee of \$50.00 or sale of \$80.00 worth of tickets per quartet.

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

Or email to [quinton1959@yahoo.com](mailto:quinton1959@yahoo.com)  
cell phone 312-493-0055