

**GALA Choruses 2007 Annual Conference**  
Denver, CO, October 4 - 8, 2007.  
Renaissance Denver Hotel  
Reservations: 888-238-6762



***Small Ensemble Registration Form***

**Join us for the 2007 Annual Conference as part of the Small Ensemble Track!** Each registered ensemble will be scheduled for two one-on-one clinics, one each with Michael Hayden and Eric Lane Barnes on Friday and Sunday. On Saturday there will be an all-day singers retreat with numerous artistic leaders on a variety of topics that small ensemble members can attend or they can attend any of the other sessions geared for chorus leadership. Small ensemble performances will be scheduled throughout the weekend and on Sunday night all of the ensembles will perform at the hotel during our Pajama Party providing two performance opportunities!

**How to Register**

Ensemble Registration for the 2007 GALA Choruses Annual Conference requires two simple steps:

1. Complete this Ensemble Registration Form and submit with payment information.
2. Each ensemble member must register for Annual Conference and pay the appropriate fee.

Ensemble clinic and performance slots are limited and will be accepted on a first-come, first-served basis. Once your Ensemble is registered, we'll send you a Production Worksheet and Concert Production Guidelines. All members of your ensemble must also register as individuals of the conference. Ensemble Registration Fees are non-refundable.

\_\_\_\_\_  
Ensemble Name

\_\_\_\_\_  
Chorus Affiliation (if any)

\_\_\_\_\_  
Primary Contact Person

\_\_\_\_\_  
Day Phone

\_\_\_\_\_  
Evening Phone

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State/Province

\_\_\_\_\_  
Postal/Zip Code

\_\_\_\_\_  
Country

Ensemble registration is \$75 US. All fees must be payable in US funds.

**Payment Method** All checks or money orders must be in US dollars and made payable to GALA Choruses, Inc.

\_\_\_\_\_  
Check Enclosed

\_\_\_\_\_  
VISA

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MasterCard

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AMEX

\_\_\_\_\_  
Discover

\_\_\_\_\_  
Name on Card

\_\_\_\_\_  
Card Number

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Expiration Date

\_\_\_\_\_  
Signature

Return this form to:  
GALA Choruses Inc., P.O. Box 99998, Pittsburgh, PA 15233  
FAX: 412-322-1814 Questions? 412-999-4489, [info@galachoruses.org](mailto:info@galachoruses.org)