# 2023 Quartet Information Form

**Although your ensemble has provided this information to SAI as part of the process to register to compete, submitting this form will allow our Reg10 contest file to be more complete. Thank you!**

| QUARTET NAME:<br>(Please print) | |
|---|---|

| **COMPETITION SONG 1:** | |
|---|---|
| **SONG 1:** *Please print and include ALL info requested* | **Contest Song Title:** |
| | Composer(s) and Arranger: |
| | Date of Purchase & Source (Proof of Copyright Clearance): |
| | Date Rated by the SAI Song Assessment Tool: |
| | **Is this a Parody?** |
| | **Song Type (Ballad/Uptune/Swing):** |

| **COMPETITION SONG 2:** | |
|---|---|
| **SONG 2:** *Please print and include ALL info requested* | **Contest Song Title:** |
| | Composer(s) and Arranger: |
| | Date of Purchase & Source (Proof of Copyright Clearance): |
| | Date Rated by the SAI Song Assessment Tool: |
| | **Is this a Parody?** |
| | **Song Type (Ballad/Uptune/Swing):** |

| **PLANNED STAGE ENTRANCE:**<br>(example: Stage Left, Stage Right, Center Stage) | |
|---|---|
| **ELIGIBILITY FOR AWARDS:** (Please indicate how many members of your quartet are competing in a quartet at regional competition for the first time.) | |

| **Pattern Point of Contact (PPOC):** |
|---|
| Please be aware that the pattern team will check your phones to make sure they are on "silent" for the duration of the contest once you are all safely checked in. |
| Please Print PPOC Name:<br><br>_____ / PPOC Cell number: (_____) - _____- _____ |

**Mail or email this form to Roz Jones, Competition Coordinator, by MARCH 1, 2023.**

54 Rainey Street Unit 1007, Austin, TX 78701

[C] 979-709-6731          cc@region10sai.org

**Please DO NOT mail this form to International ... Mail or email it to the address above.**