

Hindustani Music Academy

3039 Magnolia Cir, Macungie, PA 18062

Annual Recital Form

Year: _____

Yes, I will attend

My Name: _____ Age: ____ Phone: _____

Email: (1) _____ (2) _____ Phone: _____

How many attending (including family & friends)
Adults: ____ Children: ____

Recital Fee per student: \$15

I would like to be the MC

I want to help with the program

My parents will help

I want to perform the following: _____

(You must present this item flawlessly by 5/15)

Time to plan ahead

I will attend 2010 Fall Semester

Comments: _____

Keep my schedule same

My schedule is flexible

I would like to attend 2010 summer session