

2009 - 10 Prospective Chapter Musical Progress Report

Send original to international headquarters. Attach a second sheet if additional space for comments is needed.

Prospective _____ Region _____ Date of Visit _____

Contact _____ Director _____

1) Average attendance at rehearsals: _____ Attendance the day of your visit: _____

2) What is the director's barbershop and/or other musical background? _____

3) Describe the director's knowledge of, or potential for, barbershop technique: _____

4) What are the director's teaching methods? _____

5) In what areas does the director need specific help? basic hand motions music selection
 knowledge of harmony vocal production leadership ability Comments: _____

6) Is the group singing barbershop harmony? _____

7) Do any of the members appear to have prior experience singing barbershop harmony, or demonstrate evidence of other musical training? _____

8) Are prospective members auditioned? _____ If no, what advice did you give them? _____

9) Describe the rehearsal agenda: _____

10) Describe group's musical progress indicating assets and weaknesses: _____

11) Did you approve the group for accepting public performances? _____

12) Is the group musically ready to charter? _____

Note to Education Coordinator: If you approve this group to charter, please sign below. The international board of directors would appreciate your comments concerning this group.

Education Coordinator's signature _____	Date _____
I approve this group to charter. <input type="checkbox"/> I disapprove this group to charter. <input type="checkbox"/>	
Comments _____	

Odometer Miles
Ground Transportation: From _____ To _____ Total _____
Or Kilometers @ \$.55 / mile \$ _____ + tolls/parking \$ _____ = \$ _____
Air Transportation: Via Other travel agency US Currency
 World Travel (prepaid) At a cost of \$ _____ Other Currency (_____) + parking \$ _____ = \$ _____

Visit made by: _____

CHECK TO BE MAILED TO:

Name _____
Title _____
Address _____

Approved by _____
Ann-Marie Dowling, Membership Coordinator
Date: _____

Approved by _____
Regional Education Coordinator

