

**Application  
Deadline:  
January 20, 2026**



## June 12 - 16, 2024 - Registration Form

Please complete this form to register for the 2026 Appalachian Festival of Young Voices.

Also, include the items listed to the right with your registration form .

- **Non-refundable** registration deposit of \$600 to the Appalachian Children's Chorus.
- A **brief history** of your children's choir.
- A **bio** of your Music Director, Accompanist and/or associate directors who will be attending the festival. Electronic versions are preferred. Send to [accinfo@wvacc.org](mailto:accinfo@wvacc.org).
- A **recent digital recording** of your children's choir performance. Please include titles, composers and publishers of each piece submitted.
- Recent **printed program** of performance repertoire.
- **Email** the following: A picture of the choir attending, the director and accompanist to [accinfo@wvacc.org](mailto:accinfo@wvacc.org).

### ORGANIZATION INFORMATION:

Children's Choir Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Phone \_\_\_\_\_ Fax \_\_\_\_\_

Website: \_\_\_\_\_

Name of Individual Choir Attending: \_\_\_\_\_

Estimated Number of Chorister Participants: \_\_\_\_\_ Total Accompanying Adults: \_\_\_\_\_

### DIRECTOR'S INFORMATION:

Director's Name: \_\_\_\_\_

Position Title: \_\_\_\_\_ Email: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### TOUR MANAGER'S INFORMATION (if applicable):

Manager's Name: \_\_\_\_\_

Position Title: \_\_\_\_\_ Email: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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How did you hear about our Festival? \_\_\_\_\_

Send **ALL information requested above** and non-refundable deposit of **\$600.00** to:

Appalachian Children's Chorus  
ATTN: Festival Application  
210 Brooks Street, Suite 309  
Charleston, WV 25301