

ALABAMA BANDMASTERS ASSOCIATION
SOLO AND ENSEMBLE
MEDAL VOUCHER

District # _____ ABA Official's signature _____

THIS SECTION MUST BE FILLED OUT COMPLETELY

DIRECTOR _____

SCHOOL _____

ADDRESS _____

CITY _____ ZIP _____

NUMBER OF MEDALS

_____ SOLO MEDALS

_____ ENSEMBLE MEDALS

TOTAL _____ @ \$5.00 = \$ _____

POSTAGE _____ 3.00 _____

TOTAL DUE \$ _____

**IF ORDERING BEFORE JUNE 15 SEND THIS
FORM AND CHECK TO DISTRICT VICE-
CHAIRMAN. AFTER JUNE 15 SEND TO THE
EXECUTIVE SECRETARY.**