



## STUDENT AFFILIATE THEORY Registration Form

Teacher Name \_\_\_\_\_ Phone \_\_\_\_\_

Teacher Email \_\_\_\_\_ Testing Period \_\_\_\_\_ Year \_\_\_\_\_

Number of Entries \_\_\_\_\_ x \$8.00 = \_\_\_\_\_ (payable to Waco Music Teachers Association)

	STUDENT NAME (alphabetized by grade)		*SCHOOL GRADE	TEST GRADE	COMMENTS
	LAST	FIRST			
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
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17					
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23					
24					
25					
26					
27					
28					
29					
30					

**\* Use this column only if the student is testing 1 grade level below school grade.**

**Students taking below grade level** should be listed with students of their **test** grade, not their **school** grade.