

Thank you for your interest in Sligo Church Music Ministry. In order to facilitate your request, I am asking that you complete the following questionnaire and provide me with a sample of the music you propose to present.

Name of Group: _____

Denomination Affiliation: _____

Contact Person: _____
(Name) (Phone)

Director/Chaperone: _____
(Name) (Phone)

Date(s) Requested: _____
1st 2nd 3rd

Service Requested: _____
(9:00AM) (11:00AM) (Other)

Performance Type :	Solo	Ensemble	Other
Vocal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Choral	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Accommodations Required:

Transportation: Air Ground

Meals:
B L D

Lodging : _____
1 night home hotel

Previous Appearance: _____
(date)

References: _____ (_____) _____
(Name) (Phone)
_____ (_____) _____
(Name) (Phone)
_____ (_____) _____
(Name) (Phone)

Please provide a CD/Video/ VHS of the type of music you propose to present – make certain that the name of your group and its contact person are clearly labeled.

Mail to my attention: Dr. Lloyd Mallory, Jr.
7770 Carroll Avenue
Takoma Park, MD 20912
Phone (301) 270-6777