COACHING CONFIRMATION FORM

Please sign, keep one copy for yourself and return one copy to:		
COACH:		
ADDRESS:		
EMAIL:	PHONE:	
Social Security Number: (for ta	x purposes)	
(please list coaching fee plus any addi	tional anticipated expenses)	
CHORUS:		
EVENT:		
DATE:		
LOCATION:		
AIRPORT or DRIVING:Driving		
HOUSING:		
(please indicate preferences)		
MEALS:		
(please indicate any special dietary ne	•	
SPECIAL NEEDS:		
ADDITIONAL COMMENTS OR C	UESTIONS:	
Chorus Representative	Date	
Coach	 Date	