SASKATCHEWAN MUSIC FESTIVAL ASSOCIATION
#2 – 62 Westfield Drive • Regina, SK S4S 2S4
Phone: 757-1722 • Fax: 347-7789 • Toll Free: 1-888-892-9929
E-mail: sask.music.festival@sasktel.net

ADJUDICATOR TIME-FRAME REQUIREMENT FORM

Date: _____

Festival Unit: _____ **Confirmed Dates:**_____**, 200**____

Now that your festival dates are confirmed, please list the adjudicator type, total number of days, which days of the week and dates you estimate you will need each adjudicator. Base the number of days on your past year's festival while it is fresh in your mind. **Please indicate if you wish any of your adjudicators to stay for your final night and remember to include time for a scholarship session.**

The selection of adjudicators is made by the Adjudicator Liaison. If you have a preference for a particular adjudicator please list them and we will attempt to book them for you. If there is an adjudicator your festival **will not accept** please list these names as well. This must be done annually as **no written record is kept** of this kind of information.

This is probably the most important form you will submit in relation to the success of your upcoming festival. Please fill it out carefully. Thank you!

Adjudicator Type	*Total Days*	*Days of the Week*	*Exact Dates*
i.e. Senior Piano	*3*	*Monday, Tuesday, Wednesday*	*January 3, 4, 5*

_____

Secretary's signature