

CHAMBER MUSIC REPORT For Local Clubs/Organizations

AR 2-1

Name of Club or Organization _____

President, Counselor or Director _____

Address _____

SENIOR/JUNIOR CLUBS

Did your club include chamber music as an entire club meeting program? _____

As part of one or more programs? _____ For a public program? _____

Does your club have a chamber music subgroup? _____ If so, what musical instruments are included?

Does the group perform for club meetings? _____ In the community? _____ In schools? _____ In hospitals and/or nursing homes? _____

Did your club sponsor or give support to a chamber music group? _____ If so, name the group

Explain type of support _____

Did your club sponsor or give support to a chamber music festival or workshop? _____

Explain _____

List any other activities involving chamber music _____

If your club sponsors an active junior club, please give a copy of this form to the counselor for reporting.

FEDERATED CHAMBER MUSIC ORGANIZATIONS

What musical instruments are included in your group? _____

How many programs have you presented this year? _____ Have you performed contemporary works? _____

Works by women composers? _____ have you commissioned any works? _____

Explain _____

List other activities in which your groups have been involved. _____

Please write additional chamber music activity on the reverse side of this page.

Include with report all programs and publicity pertinent to activities. Underline *in red* any mention of the National Federation of Music Clubs. Send to State Chair for Chamber Music *postmarked on or before April 1*. State Chairs should report to National Chair, Lorraine Long, 814 Nebraska Ave., Kansas City KS 66101, postmarked on or before May 1.