



# Sanction Request Form A CONTEST & CONTACT INFO

DUE: Before entry forms are distributed to prospective competitors or 6 weeks before contest, whichever is earlier

**INSTRUCTIONS:**

Complete all fields.  
 Attach Form B and Draft Entry Form  
 Email (preferred) completed forms to:  
[sanctioningwuspba@gmail.com](mailto:sanctioningwuspba@gmail.com), or email for  
 physical address if necessary.

Contest Location: \_\_\_\_\_

Contest Date(s): \_\_\_\_\_

OFFICIAL USE ONLY	
Schedule of Events:	<input type="checkbox"/> Received <input type="checkbox"/> Approved
Entry Form:	<input type="checkbox"/> Received <input type="checkbox"/> Approved
Adjudicator's List	<input type="checkbox"/> Received <input type="checkbox"/> Approved
Fee Worksheet:	<input type="checkbox"/> Received <input type="checkbox"/> Approved
Sanctions Granted:	Fees:

Official Name of Festival: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Sponsor Mailing Address: \_\_\_\_\_

Web Page: \_\_\_\_\_

E-mail: \_\_\_\_\_

Person in Charge of:

Solo Contests

Band Contests

Name: \_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

\_\_\_\_\_

E-mail: \_\_\_\_\_

\_\_\_\_\_

Person in Charge of:

Massed Bands

Payment of Contest Permit Fees

Name: \_\_\_\_\_

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Address: \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail:

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