

Quartet Information
Fact Form

Quartet Name _____

Soprano _____

Alto _____

Tenor _____

Bass _____

Date of this rehearsal _____

Time Starting _____

Time Ending _____

Explain what was rehearsed and accomplished:

By **signing** below you are stating that all the information on this sheet is **true** and **accurate**. This sheet must be returned within 3 days of the rehearsal in order to receive credit. **ALL rehearsals must involve ALL members to receive credit.**

Soprano _____

Alto _____

Tenor _____

Bass _____