UNIVERSITY OF
SOUTH DAKOTA

USD All-State Workshop Registration

Number of students attending _____

Teacher Name _____

School Name _____

School Address _____

_____

Phone number _____

Email address _____

Total payment ($5.00 per student times number of students participating) **$ 0.00**

Please make checks payable to: **USD – Department of Music**

Payment may be included with mail-in registration or made on the day of the workshop.

Please attach a list of names and voice parts of participating students for inclusion into the concert program. If you do not have this information yet, please email it as soon as you have it available.

Please complete and return this registration form by **Wednesday, September 30, 2026**

Mail to: **David Holdhusen**
Department of Music
or **University of South Dakota**
414 E. Clark St.
Vermillion, SD 57069

E-mail above info to: **david.holdhusen@usd.edu**