



Association of Wisconsin Area Kodaly Educators
Saturday, February 8th, 2025 9-3:30
Lakeland University, W3718 South Drive, Plymouth, WI 53073



AWAKE is pleased to announce **Corynn Nordstrom** as our Guest Clinician for the 2025 AWAKE Choral Festival. For the past 21 years, Corynn has taught music for children in pre-Kindergarten through High School. She is grateful to be in her 7th year teaching general music for students in Kindergarten through 2nd Grade at Benjamin Franklin Elementary in Menomonee Falls. Corynn enjoyed directing the Milwaukee Children's Choir Introductory Choir for five years and the MCC Music Explorers program for 1 year. She also teaches summer beginning woodwind lessons for area middle school band programs and vocal directs for Musical Masquers, Inc. youth musical theater camps.

Corynn attended the University of Michigan for her B.M. in clarinet performance and music education, and after teaching several years in the metro Detroit area, her M.M. in music education from the University of Michigan with an emphasis on elementary choral direction. A lifelong learner, Corynn is a national board certified teacher, and holds certifications in Music Learning Theory, Kodály, and Orff-Schulwerk. She is looking forward to her next opportunity to go back to school!

Corynn served several years as treasurer for the Michigan Music Educators Association, and was awarded the Hilda E. Humphrey Award for service to the profession early in her career. After moving to Wisconsin, Corynn served two terms as Early Childhood Music Chair on the Wisconsin Music Educators Association Council, writing articles for the Wisconsin School Musician Magazine on Early Childhood Education topics. She has presented a variety of sessions on music education at many music conferences, including the Wisconsin Music Conference in Madison, and was the 2024 recipient of the Civic Music MKE certificate of excellence award for general music instruction.

Until her daughters' academic and artistic pursuits began taking over her free time, Corynn enjoyed playing clarinet and auxiliary clarinets for Knightwind Ensemble and the Kettle Moraine Symphony, as well as doubling on flute, clarinets and saxophones for community musical theater groups. She still gigs occasionally, playing clarinet with Blaskapelle MKE and the Manitowoc Symphony, and continues to sing and play instruments at her church. Corynn and her husband Tyler are proud band parents of daughter Robin, orchestra parents for daughter Annalise, and choir and theater parents for both!

Choral music packets will be mailed out in December, along with directions to our website to access rehearsal recordings and director's notes. The 4th-8th grade students you select should represent your most talented and cooperative singers. Please be sure to balance your group with an equal number of students per part. ***Your prompt registration is crucial! We will be able to accommodate a maximum number of 75 students due to space and safety issues. To ensure your students' inclusion and to receive the music in a timely manner all registration materials must be mailed by the Friday, November 1st deadline.**

Please see the tentative schedule for the day listed on the registration form. The concert is open to the public and tickets will be available for purchase at the door, \$5 for adult tickets and \$3 for children's tickets. Teachers should plan to have at least one other chaperone/adult in addition to yourself available at all times during the rehearsal that day.

Tentative Schedule for February 8th

8:30 Registration
9:00 Rehearsal
12:00 Lunch
1:00 Rehearsal for students
3:00 Doors open for concert
3:30 Concert (open to public)

Please fill out the registration form and return it with **one check payable to AWAKE** to arrive no later than **November 1st** to:

Attn: Kaye Schmitz
Sheboygan Falls Middle School
2 W. Alfred Miley Way
Sheboygan Falls, WI 53085

Health and permission forms must be signed and sent with the registration form.

You can download additional forms and find more information on our website: <https://www.wisconsinkodaly.org> If you have any questions please contact Kaye Schmitz or Brittany Ward (awaketreasurer@gmail.com). You will not regret signing your students up for this exceptional opportunity! We look forward to seeing you in February!

Sincerely,
Caitlin Dahl
AWAKE Secretary

AWAKE CHILDREN'S CHOIR FESTIVAL
Saturday, February 8th, 2025 9-3:30
Lakeland University, W3718 South Drive, Plymouth, WI 53073

REGISTRATION FORM
Due November 1, 2024

Include *one check* payable to **AWAKE** with this registration form. To facilitate prompt delivery of music, please register as soon as possible. Please divide your students equally into parts I and II.
(Use as many lines as needed--copy as needed; print or type, this info will be used for the program)

Voice (Part I, Part II)

Student: _____ Grade: _____ Voice: _____
Student: _____ Grade: _____ Voice: _____
Student: _____ Grade: _____ Voice: _____
Student: _____ Grade: _____ Voice: _____
Student: _____ Grade: _____ Voice: _____
Student: _____ Grade: _____ Voice: _____
Student: _____ Grade: _____ Voice: _____

Director's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (H): _____ (W): _____

Email: _____

School Name: _____

Number of **youth** t-shirts: size s _____ size m _____ size l _____ size xl _____ size xxl _____

Number of **adult** t-shirts: size s _____ size m _____ size l _____ size xl _____ size xxl _____

Directors t-shirts: size s _____ size m _____ size l _____ size xl _____ size xxl _____

Number of Adult Lunches: _____ (X \$8.50) = \$ _____

Number of Director's Music Packets: _____ (X \$15) = \$ _____

Number of Children Attending: _____ (X \$35-AWAKE Members or \$45-non-AWAKE members)

= \$ _____

Mail Registration, Permission, and Health forms to:

Attn: Kaye Schmitz
Sheboygan Middle School
2 W. Alfred Miley Way
Sheboygan Falls, WI 53085

by November 1st

Total Enclosed = \$ _____

HEALTH FORM

Student: _____ Age: _____ M ___ F ___

Parent(s): _____

Address: _____

Phone: _____ Cell Phone: _____

Insurance Provider: _____

Group #: _____ Subscriber #: _____

Please list below any known allergies or other health conditions:

Contact in case of an emergency (if different from above)

I/We hereby give permission for our son/daughter to be given treatment by a medical professional under advice from a member of AWAKE during the Children's Choir Festival on February 8th, 2025

Parent/Guardian Signature: _____ Date: _____

STUDENT PERMISSION FORM

AWAKE CHILDREN'S CHOIR FESTIVAL

Saturday, February 8th, 2025 9-3:30

Lakeland University, W3718 South Drive, Plymouth, WI 53073

Student Participation Permission Form:

I hereby give permission for _____ (Student's name, PLEASE PRINT) to participate in the AWAKE Children's Choir Festival to be held at Lakeland University on February 8th, 2025.

I understand the fee of \$35.00 (\$45.00 for students of non-members) will cover lunch, music and other costs incurred by the festival. Students will also receive a t-shirt, the day of the festival, to wear at our performance.

Please check the correct size for your child:

My child will need a **youth** size shirt:

size s _____ size m _____ size l _____ size xxl _____

My child will need an **adult** size shirt:

size s _____ size m _____ size l _____ size xxl _____

Parent/Guardian Signature: _____ **Date:** _____

AWAKE is not responsible for travel arrangements to and from Lakeland University.

Student Release Form

I, _____ (Parent/Guardian name, PLEASE PRINT) agree not to hold The Association of Wisconsin Area Kodaly Educators (AWAKE) or the hosting school district responsible for any injury sustained by my son/daughter during his/her participation in the Choral Festival. I understand that my child may be photographed, audio or videotaped while participating in the Choral Festival. These photographs and recordings may be used in programs or publications for educational and promotional purposes. I therefore release all claims against AWAKE with respect to privacy issues pursuant to Wis. Stat. 895.50, copyright ownership and publication, and any claim for compensation related to the use of these materials.

Parent/Guardian Signature: _____ **Date:** _____

Scholarship Nomination 2025

AWAKE Choral Festival

AWAKE

An Affiliate Organization of OAKE

The AWAKE Choral Festival Scholarship is for students of AWAKE members who wish to participate in the AWAKE Choral Festival. The scholarship amount will be a maximum of \$45 and awarded on recommendation of the student's music teacher and need of the student.

Choral Event _____ Date of Event _____

Student Name _____

Grade 4 5 6 7 8

Address _____

_____ City _____

Zip Code _____

Telephone _____

_____ E-mail _____

School/Choir name _____

Teacher Name _____

Teacher Address _____

Teacher Phone Number _____

Teacher email _____

OAKE member number _____

Why are you nominating this student for an AWAKE Scholarship? _____

On a separate piece of paper the nominated student needs to answer the following question: **Why do you want to be in the AWAKE Choral Festival?**

Nominating Teacher Signature _____

Mail to: Attn: Kaye Schmitz
 Sheboygan Falls Middle School
 2 W. Alfred Miley Way
 Sheboygan Falls, WI 53085

Deadline date: November 1, 2024

Recipients of scholarship awards will be notified: December 2024