

Order Form for MAP Materials

Name: _____

Address: _____

Email: _____

(Note that only teachers and CSMTA members may order materials.)

Sample letter to parents (This may be helpful to you in explaining MAP)
No charge

Syllabus, Theory and Performance

Complete (levels 1 - 10) \$10 \$ _____

Individual levels \$1.50 each \$ _____

Practice Theory Tests

Complete (levels 1 - 10) \$30 \$ _____

Individual levels \$3 each \$ _____

Practice Keyboard Skills Exams

Complete (levels 1 - 10) (individual levels not available) \$1.50 \$ _____

Practice Sight Reading and Transposing Examples

Complete (levels 1-8) (individual levels not available) \$2.50 \$ _____

Total: _____

Please make checks payable to: CSMTA.

Please send checks to:

Suzan Korman, 100 Old Maids Lane, South Glastonbury, CT 06073