

PMEA DISTRICT 3 JAZZ BAND FESTIVAL APPLICATION

Send to FESTIVAL COORDINATOR

NAME _____ GRADE _____ SEX _____
HOME ADDRESS _____ CITY _____ ZIP _____
HOME PHONE _____ SCHOOL NAME _____
SCHOOL PHONE _____ INSTRUMENT _____

PMEA/HONORS GROUPS PREVIOUSLY PARTICIPATED

STUDENTS SHOULD NOT APPLY TO PARTICIPATE IN FESTIVALS IF, FOR ANY REASON (INCLUDING RELIGIOUS ACTIVITIES) THEY PLAN TO MISS PART OF THE EVENT. A STUDENT MUST PARTICIPATE IN THE COMPLETE FESTIVAL PROGRAM FROM REGISTRATION THROUGH THE FINAL CONCERT, EXCEPT IN THE CASE OF ILLNESS.

PARENT/GUARDIAN: PERMISSION IS GRANTED MY SON/DAUGHTER TO PARTICIPATE IN THE PMEA **DISTRICT 3 JAZZ BAND FESTIVAL** DURING THE 20209-2010 SCHOOL YEAR. I WILL NOT HOLD PMEA, THE HOST SCHOOL, NOR ANY PMEA MEMBER RESPONSIBLE FOR ANY UNFORESEEN ACCIDENT, ILLNESS, OR LOSS OF PROPERTY OCCURING DURING, OR IN TRANSIT TO/FROM THE FESTIVAL. I CERTIFY THAT ALL INFORMATION ON THIS FORM IS CORRECT. I ALSO UNDERSTAND THAT VIDEO AND/OR AUDIO RECORDINGS OF REHEARSALS AND/OR PERFORMANCE ARE ILLEGAL AND WILL NOT BE ALLOWED BY THE AUDIENCE OR THE PERFORMERS.

DIRECTOR: AS THE STUDENT'S DIRECTOR I CERTIFY THAT THE STUDENT IS A MEMBER IN GOOD STANDING OF THE SCHOOL'S APPROPRIATE PERFORMING ORGANIZATION.

STUDENT SIGNATURE _____

PARENT/GUARDIAN SIGNATURE _____

DIRECTOR'S SIGNATURE _____

ALL BLANKS MUST BE COMPLETED - PMEA IS NOT RESPONSIBLE FOR INCORRECT OR MISSING INFORMATION