

# 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:

\_\_\_\_\_  
\_\_\_\_\_

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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.

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PARENT/GUARDIAN: PERMISSION IS GRANTED MY SON/DAUGHTER TO PARTICIPATE IN THE PMEA **DISTRICT 3 JAZZ BAND FESTIVAL** DURING THE **2011-2012** 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:**

I certify that this student is a member in good standing in our school's appropriate performing organization.

\_\_\_\_\_  
(Director's Signature) \_\_\_\_\_ Date

**SCHOOL ADMINISTRATOR:**

I certify that this student is academically eligible to participate in the District 3 Jazz Band Festival, and that the student is of good character.

\_\_\_\_\_  
(Administrator's Signature) \_\_\_\_\_ Date

**PARENT / GUARDIAN:**

I hereby grant permission for our son/daughter to participate in the PMEA All-State Festival and all related activities. Our student will participate in the All-State Jazz Ensemble if selected.

\_\_\_\_\_  
(Parent / Guardian Signature) \_\_\_\_\_ Date

**STUDENT SIGNATURE:**

\_\_\_\_\_  
(Student Signature) \_\_\_\_\_ Date

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