

Mississippi Bandmasters Association



ALL STATE CONCERT BAND DECLARATION FORM

THIS FORM MUST BE COMPLETED, SIGNED, AND TURNED IN AT THE CALL BACK AUDITIONS FOR THE MISSISSIPPI LIONS ALL STATE BAND.

RETURN THIS FORM TO THE JUDGE CHAIRMAN IN YOUR AUDITION ROOM.

The All State Concert Band will take place at the MBA State Band Clinic on Dec. 9-12 in Natchez, MS. Students must check in/register on Wednesday, Dec. 9. Rehearsals will begin at 8:00 AM on Thursday, Dec. 10 and the concert performance for the All State Concert Band will be on the evening of Friday, Dec. 11th.

The ACT is also being given on Saturday, December 12th. All State Concert Band Students may check out with their parents on Friday night following their concert if needed. Last year several All State Concert Band Students opted to take the ACT on Saturday morning in Natchez.

Other Clinic Band students are required to stay through their final concert on Saturday and are not allowed to take the ACT if participating in State Band Clinic.

PLEASE PRINT BELOW

STUDENT NAME:		
INSTRUMENT:	School:	
Parent Name:	Parent Pho	one Number:
Parent Cell Number:	Student Ce	ell Number:
Parent Email:		
Student Email:		·
YES, I will particip	pate in the 2015 MBA All Stat	e Concert Band if selected.
NO, I will not par	ticipate in the 2015 All State	Concert Band if selected.
	e that your declaration will ha sissippi Lions All State Band.	ive no impact whatsoever on your status
Student Signature	Parent Signature	Band Director Signature