



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. 6-9 in Natchez, MS. Students must check in/register on Wednesday, Dec. 6. Rehearsals will begin at 8:00 AM on Thursday, Dec. 7 and the concert performance for the All State Concert Band will be the evening of Friday, Dec. 8th.

The ACT is also being given on Saturday, December 9th. 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 Phone Number: _____

Parent Cell Number: _____ Student Cell Number: _____

Parent Email: _____

Student Email: _____

_____ **YES, I will participate in the MBA All State Concert Band if selected.**

_____ **NO, I will not participate in the All State Concert Band if selected.**

PIANO PLAYER TO BE SELECTED FROM QUALIFYING MEMBERS OF THE ALL STATE CONCERT BAND

_____ **Yes, I play piano proficiently and would be willing to perform a selection with the All State Concert Band if needed.**

Disclaimer: Please realize that your declaration will have no impact whatsoever on your status as a member of the Mississippi Lions All State Band.

Student Signature

Parent Signature

Band Director Signature