

PENNSYLVANIA MUSIC EDUCATORS ASSOCIATION REGION FESTIVALS

CONTRACT

Please **print or type** all sections on both sides of this CONTRACT
and return with MEDICAL FORM and PAYMENT to:
Festival Host Director
School Street
City, State & Zip Code

SECTION 1: To be completed and endorsed by student.

Student Last Name		Student First Name		Instrument / Voice Part		Age	
Grade	Sex	Height in Inches (Choir Only)		Home Phone Number			
Home Street Address		(Apt. Number)	City		State	Zip Code	
Name of School District		Name of High School		School Address			
School Phone Number							

CONTRACT AGREEMENT :

I hereby acknowledge and accept the following rules regarding the PMEA Festival in which I am participating. I agree to abide by these rules and by all policies which have been adopted or which may be adopted in the future by PMEA regarding this event. I understand that PMEA has sole discretion to make all decisions, including but not limited to, decisions regarding disciplinary matters and the final approval of students selected to perform. I also agree to:

1. Prepare assigned music prior to arriving at the Festival.
2. Conduct myself courteously and appropriately at all times.
3. Abide by the Student Code of Conduct and Rules.
4. Neither use nor have in my possession at any time alcoholic beverages, illegal drugs or substances.
5. Not to smoke during the entire Festival beginning with on site registration & concluding with the concert.
6. Not participate in pranks or vandalism of any kind. (If I damage any property, my parents and/or I will assume full financial responsibility).
7. Abide by all decisions made by appropriate PMEA officials and obey all regulations listed above as well as any other regulations which may be implemented in the future by the host director or other administrative official.
8. Wear proper identification badge at all times.
9. Cooperate fully with host director & all PMEA officials.
10. Protect and promptly return all music materials after the concert, if requested.
11. Attend all rehearsals and concert(s) on time. **(Students should not apply to participate in festivals if, for any reason, including religious activities, they plan to miss part of the affair. A student must participate in the complete festival program commencing with registration and concluding with the final concert, except in case of illness that must be verified in writing by a physician within 5 days of the festival. Students must rehearse and perform all musical compositions selected for the concert.)**

In signing this contract, I understand that membership in any PMEA Festival is a privilege and that membership may be forfeited if I fail to follow any of the above rules. I understand that violation of the above rules will give administrative officials the right to exclude me from participation. If such violation(s) occur, I understand that my parents/guardian will be immediately notified, and that they will be expected to provide my immediate transportation home.

Student Signature

Date

SECTION 2: To be completed and endorsed by parent or guardian.

I have read this official PMEA Festival document, discussed its contents with my son/daughter, agree to its contents, and agree to support its enforcement. I understand that the school will arrange transportation with my cooperation and understanding to the festival. (Students are not permitted to drive during a PMEA Festival) I also understand that my son/daughter will be housed with a host family or in a hotel while a participant in the PMEA Festival. My son/daughter has my permission to participate and I understand that his/her participation in this festival is solely at his/her own wish and that I will not hold PMEA and its officers, directors, employees or volunteer officials responsible for any injuries or damage my son/daughter may suffer in any way related to this event.

Parent/Guardian Printed Name (____)_____
Home Phone (____)_____
Work Phone

Parent/Guardian Signature Date

SECTION 3: To be completed and endorsed by School Personnel

Student Name (____)_____
School Phone Number

We, the undersigned, have read this official PMEA Festival document, discussed its contents with the student and agree to support its enforcement. We understand that the school will arrange transportation with parent/s/guardian's cooperation and understanding to this event. (Students are not permitted to drive during a PMEA Festival) We endorse this student as an outstanding musician and student worthy of PMEA Festival Membership. We will assist him/her in preparing the music selected for the program.

Music Teacher Printed Name MENC/PMEA I.D. Number Expiration Date

Music Teacher Signature Date

School Principal Signature Date

Please list below the name and title of the **PMEA member/director** from **YOUR HIGH SCHOOL** who will be attending this PMEA Festival and who will assume responsibility for this student and accompany the student to the On-Site Registration and serve on the Audition Committee. Every student is required to have a PMEA Member accompany him/her to registration and auditions and to **REMAIN FOR THE AUDITIONS**.

Name Title

Phone number during the festival Email address Home phone

SECTION 4: To be completed and endorsed by parent or guardian and student

If selected for _____
(Name of festival Date Location)

_____ will _____ will not _____ attend.)
(Student's Name)

(Parent or Guardian's Signature)

Return both sides of this CONTRACT, MEDICAL FORM and PAYMENT to:

PMEA Host Director:

Street Address

City, State & Zip

DEADLINE : mm/dd/yyyy

Keep a Copy for your records.

PMEA USE ONLY: _____ Check or PO # _____ Check Date _____ Amount _____ Recv'd Date