



NYSSMA Area All-State Music Festival

Commitment, Media Release, and Permission(s)

Students in Grades 9-12 are invited to apply for participation in the Zone 7 Area All-State Music Festival, **November 15th and 16th, 2019** at Saratoga Springs High School. Students may apply for Band, Chorus, Full Orchestra, and Jazz Band. In the event of a weather related cancellation, concert will be moved to Sunday, November 17th. Students must be participating members (with at least 50% attendance) of their corresponding school music groups, where such groups exist.

APPLICATION PROCEDURE: Students must complete and submit this form to their school music teacher. RECORDED Auditions are required for Jazz Band only, and should be emailed to the chairperson by your teacher. For each student selected to participate in the Area All-State Music Festival, there is a participation fee of \$18. Check with your music teacher to find out how this fee is paid.

PERMISSION AND COMMITMENT TO PARTICIPATE

“My son/daughter has permission to participate in the 2019 Area All-State Music Festival, held at Saratoga Springs High School on Friday and Saturday, November 15th and 16th, 2019. Snow date: November 17th. We understand that, if selected to participate, preparation of music before the festival is expected, attendance at all rehearsals is mandatory, and concert attire is required.”

MEDIA RELEASE

“I hereby acknowledge that the performance of my child may be photographed, reproduced, and/or recorded on compact disc, DVD and/or other similar devices and may be displayed and/or heard in NYSSMA publications and/or on the NYSSMA website without remuneration.”

BUS PERMISSION (if required by your school district)

“My son/daughter has permission to ride the district bus to/from Saratoga Springs High School for the Area All-State Music Festival on Friday and Saturday, November 15th and 16th, 2019. Snow date: November 17th. I understand that my school district may or may not provide transportation home after the concert, so I will provide or arrange transportation from this event if necessary.”

“I wish to be recommended for the following Area All-State ensembles:” (Use numbers to indicate order of preference)

Band _____ **Orchestra** _____ **Chorus** _____ **Jazz Band** _____

Print Student Name _____ Student Signature _____ Date _____

Print Parent/Guardian Name _____ Parent/Guardian Signature _____ Date _____

In case of emergency,

 Home Phone Number Parent/Guardian Cell Phone number Parent/Guardian Cell Phone number