

MMEA JAZZ FESTIVAL APPLICATION FORM
(COMPLETE ONE FORM FOR EACH PERFORMING GROUP - PRINT NEATLY)

MMEA Institutional Number _____ MMEA District Number _____

SCHOOL NAME _____

SCHOOL ADDRESS _____

_____ ZIP _____

SCHOOL PHONE _____ SCHOOL FAX _____

SCHOOL ENROLLMENT *(as of October 1st)* _____

Director's Name _____ Phone _____

Director's e-mail address _____

Choreographer's Name _____ CD Player Needed : Yes No

Type of Ensemble <i>(circle one)</i>	MS Jazz Band	HS Combo	MS Show Choir
	HS Jazz Band	HS Multiple Combo	HS Show Choir
	HS Multiple Jazz Band		HS Jazz Choir

Group Name _____

_____ Comments Only *(District festivals only)*

I have read and understand the information contained in the "Performance Criteria" document

Please complete the selections to be performed/soloists form and return with this application

MMEA JAZZ PERFORMANCE ADJUDICATION FORM

SCHOOL _____ DIRECTOR _____

NAME OF GROUP _____

SELECTIONS TO BE PERFORMED

- 1. _____ Comp/Arr _____
- 2. _____ Comp/Arr _____
- 3. _____ Comp/Arr _____
- 4. _____ Comp/Arr _____

SOLOISTS

[Only list soloists once but indicate the selection(s) on which they will perform]

<u>Name</u>	<u>Instrument(s)</u>	<u>Selection(s)</u>
_____	_____	1 2 3 4
_____	_____	1 2 3 4
_____	_____	1 2 3 4
_____	_____	1 2 3 4
_____	_____	1 2 3 4
_____	_____	1 2 3 4
_____	_____	1 2 3 4
_____	_____	1 2 3 4
_____	_____	1 2 3 4
_____	_____	1 2 3 4
_____	_____	1 2 3 4
_____	_____	1 2 3 4

SOLOIST(S) RATING

1 EXCELLENT 2 GOOD 3 FAIR

Comments to soloist(s)

Adjudicator

