

L.M.E.A. ALL-STATE GROUPS

REGISTRATION FORM # 2

ALL-STATE ORCHESTRA

RETURN BY OCTOBER 22 TO:

**KATRICE LACOUR
ORCHESTRA DIVISION CHAIR
748 COCO BED ROAD
CLOUTIERVILLE, LA 71416**

Please type or print legibly so your name will not be misspelled on the concert program. Fill in all blanks.

Name _____ Instrument _____

Mailing Address _____ Telephone () _____

City _____ State _____ Zip _____

School _____ Grade _____

REMITTANCE OF FEES

Fees Enclosed \$ 55.00

Meals and Housing are not included.

Make checks payable to **L.M.E.A.** No refund if student does not participate.

NO PERSONAL CHECKS – Send school check, booster club check or money order.

All-State is partially funded by the Louisiana Music Educators Association Foundation.

ALL-STATE SHIRT S M L XL XXL (Shirts are free to All-State members.)
(circle one)

The signatures below attest to our understanding of all L.M.E.A. All-State rules, regulations and policies.

(Student's Signature)

(Parent's Signature)

Music Teacher Statement

I understand that a student whose director is not a current member of L.M.E.A. and is not pre-registered for the L.M.E.A. Conference will be ineligible to participate in L.M.E.A. All-State. My LMEA/NAfME dues have been paid.

(Music Teacher's Signature)

NAfME ID # _____

EXPIRATION DATE _____