

MHSAA / MMEA STATE PERFORMANCE ASSESSMENT

FORM 3C

CENTRAL REGISTRATION FORM

Due: Friday, January 17, 2025

This form and a copy of a P.O. completes registration.

Schools will only be placed on the performance schedule once registration is completed.

School _____ Director _____

Cell Phone _____ Email _____ School Classification _____

Travel Time (One Way) _____ Preferred Date _____ Preferred Time _____

Extenuating Circumstances _____

Voicing	Type of Group <i>Choir or Ensemble</i>	Choir SWSTK <i>Yes or No</i>	# Participants in Group	Participant Fee	Group Total	MHSAA OFFICE USE ONLY
				x \$5.00 =		P.O.# _____
				x \$5.00 =		P.O. Amount _____
				x \$5.00 =		Date Received _____
				x \$5.00 =		CK# _____
				x \$5.00 =		CK Amount _____
				x \$5.00 =		Date Received _____
				x \$5.00 =		Initials _____
Total Participants			→	x \$5.00 =		
Assessment Data Fee, REQUIRED					→	+ \$40.00
Total Amount Due					→	\$
(Check made payable: MHSAA, paid in full prior to assessment)						

Submit completed form & a copy of P.O.
 (postmarked by Friday, January 17, 2025)
 Jordan Langworthy, MMEA Senior High Choral Division President
 Central Site Coordinator
 103 Trace Pointe Place; Clinton, MS 39056
jangworthy@madison-schools.com

Principal's Signature (Required)

Date

Choral Director's Signature