



Honor Jazz Ensemble

South Region

Entry Form

Form B2

Postmark Deadline: October 14, 2005

School: _____ City: _____ School phone: () _____

Director: _____ TPSMEA Membership #: _____ Cell phone: () _____

E-mail address: _____

Please **TYPE** or **PRINT** all entries clearly. Be sure to check the spelling of student names.

	<u>Student Names</u>	<u>Instrument</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____

PLEASE MAKE COPIES IF MORE SPACES ARE NEEDED!

Students will not be allowed to audition unless the school's director or sponsor is a paid member of TPSMEA for the current school year.

Director's Signature: _____
(Director's signature certifies student's eligibility under TPSMEA requirements.)

ENTRY SUMMARY

Total # of entries _____ @ \$15.00 per entry = \$ _____

\$25.00 per school = \$ _____

Total enclosed = \$ _____ (check payable to TPSMEA)

Send this form and entry fees to:

Send copies of form and check to:

Sarah Fullerton
The Kinkaid School
201 Kinkaid School Drive
Houston, Texas 77025

OFFICE USE ONLY

Check No.: _____
Date Received: __/__/05
Amount: \$ _____