

MHSAA / MMEA STATE PERFORMANCE ASSESSMENT

FORM 3C

CENTRAL REGISTRATION FORM

Due: Friday, January 12, 2024

*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 <i>Choir or Ensemble</i>	# 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 =		
			x \$5.00 =		CK# _____
			x \$5.00 =		CK Amount _____
			x \$5.00 =		Date Received _____
			x \$5.00 =		
Total Participants →			x \$5.00 =		Initials _____
Assessment Data Fee, REQUIRED → (Audio Recording)				+ \$40.00	
Total Amount Due → (Payable to MHSAA, prior to assessment)				\$	

Check payable: MHSAA
Submit completed form & a copy of P.O.
(postmarked by Friday, January 12, 2024)
Jordan Langworthy, MMEA HS Division President-Elect
Central Site Coordinator
534 Oak Park Circle; Pearl, MS 39208
jangworthy@madison-schools.com

Choral Director's Signature

Date

Principal's Signature (Required)