

Mississippi Bandmasters Association Director Information Form

Please submit a separate information form for each director. You may pay with one check or one Purchase Order for multiple directors. Please include this form for each director with your payment. *This form is also available to submit online.* **Please submit your dues to:**

Sharon Laird, 1st Vice President MBA
5198 Old Hwy 11 Hattiesburg, MS 39402
Email: Sharon.laird@lamarcountyschools.org

Director First Name: _____

Director Last Name: _____

MBA Dues Classification:

____ Director/Teacher \$80.00
____ Student Teacher/College Student \$40.00 (No Voting Rights)
____ Retired Director \$40.00 (No Voting Rights)

School Name: _____

School Type:

____ High School ____ Middle School/Junior High ____ Other

School Address: * If you don't have a school address use your home address.

City _____ **State** _____ **Zip Code** _____

District/School Classification *

____ 6A ____ 5A ____ 4A ____ 3A ____ 2A ____ 1A
____ Private School ____ Retired ____ Other

Director Email Address _____

School Phone: _____

Director Contact Phone: The best number to reach you. _____

Primary Instrument/Area * Mark All That Apply

• Flute _____ Oboe _____ Bassoon _____ Clarinet _____ Saxophone _____
• Trumpet _____ French Horn _____ Trombone _____ Euphonium _____
• Tuba _____ Percussion _____ Colorguard _____ Other: _____

I would be willing to serve in the following areas: Check All That Apply

- ____ State Band Clinic Judge
- ____ State Band Clinic Band Chairman
- ____ State Band Clinic Registration Assistant
- ____ Mississippi Lions All State Band Judge
- ____ Other: _____