MBA To-Do List for Directors
2017-2018

- If you are using school or district funds to pay your MHSAA or MBA fees, remember to write out your requisitions EARLY. You most likely can send your paperwork along with your requisition and INVOICE, and your central office staff will mail the check along with your paperwork. **For MBA dues, Championship entry fees and State Band Clinic student fees, make a note on your requisition that the vendor address and contact person needs to be updated. (The 1st Vice President serves as treasurer, and rotates each year). If needed a new W-9 form is included in this document and available online. GIVE THIS W9 FORM TO YOUR BUSINESS OFFICE OR BOOKKEEPER TO MAKE SURE THE ADDRESS FOR SENDING CHECKS GETS UPDATED.**

- Pay your MBA dues either at the Fall Meeting (August 26, 2017) or mail them to 1st Vice President, Len Killough at Hernando High School. Complete the online Director Registration Form **(This form must be submitted online)** available on www.msbandmasters.com and follow instructions to mail in your dues. Complete a separate form for each director or person that you are paying dues for. In order to participate in State Band Clinic and/or All-State Concert Band, you must be a member of the MBA. Dues are $80 ($40.00 for teacher interns and adjunct staff) and must be paid by September 15, 2017. The MBA can accept purchase orders; we CANNOT accept credit cards. Registration forms need to be completed online.

- Download a copy of the MHSAA Band Manual from www.misshsaa.com. Print out a copy. Complete Band Bulletin IV and mail / email the form and your P.O./check to the **MHSAA.** The mailing address is **PO Box 127, Clinton, MS 39060.** Don't forget to have your principal sign where indicated. Your athletic director can help you determine which students are ineligible, by using the new C2C software.

- The State Marching Evaluation Registration Form **must be submitted online and also mailed to your Regional Host,** along with the $200 fee. A list of schools by region can be found in the MHSAA Band Manual. This form can also be filled out online. Print the confirmation form and mail with your fee. Make Checks Payable to Your REGIONAL SITE HOST.

- If you want your band to be considered for the MHSAA/MBA Marching Championship, complete the Championship Declaration Form online and mail it, along with the fee, to **Len Killough at Hernando School.** More information regarding the championship can be found in the Band Manual.

- Complete your State Clinic Nomination form. **This form must be submitted online. Fees must be mailed to Len Killough at Hernando High School.** Begin your requisitions for Clinic Fees ($120 per student). Assume you will have 2 high school students selected, and one junior high student. If you are the single director for grades 6-12, you may only submit one list. Assemble your nominations as you wish, and indicate JH or HS.

- The Music Selection and Seating Chart for State Concert Evaluation will be filled out in the Spring. You will also need to provide original scores of the selections you are performing for each concert adjudicator. Remember that you must perform one piece from the MBA required music list. The most up-to-date list will be found on the MBA site in late October and in the State Clinic Program Book at State Clinic in December. **This form will also be completed online in January/February.**

- Check the Bandmasters website frequently (www.msbandmasters.com). Information regarding State Band Clinic, All-State Band, State Marching and Concert Evaluations, and MBA meetings will be posted there. Contact information for the officers is on the site as well; if you have any questions, any officer will be happy to help you.

- Information about Lion's Band Tryouts can be found at www.misslionsband.org.

COMPLETE THIS FORM AND SEND TO MHSAA BY SEPTEMBER 15TH.

BAND BULLETIN IV

STATE BAND EVALUATION

- **Concert and Sight Reading: April 9 - 12 and April 16 - 19, 2018**
- **Sites: Central Region @ Pearl – April 9 - 12 / North Region @ Tupelo – April 16 - 19 / South Region @ Oak Grove – April 16-19**
- **State Regional Marching Evaluations - Held at Assigned Sites – Date: October 14, 2017**

*No school will be allowed to participate in the State Band Evaluation unless information is received or envelope (containing information) is postmarked prior to or not later than the deadline, **September 15,** Please refer to Section F, Band Organization Administration Rules and Regulation, Rule 14 (5) (d) of the *Band Information Manual*, which reads as follows: "Late entrants will be accepted by paying $100.00." You must specify the CLASSIFICATION in which you plan to enter the State Band Evaluation.

***All Middle School Bands who participate in concert evaluation must complete this form, submit the MHSAA $5.00 per student fee, and submit the $75.00 site fee.**

***You must furnish original concert scores (No copies) for all numbers (warm-up, selected, and required).** Have three scores of each – one for each concert adjudicator. PLEASE HAVE YOUR BAND'S NAME ON THE SCORES ENCLOSED IN A LARGE ENVELOPE; AND BRING THEM WITH YOU TO THE STATE BAND EVALUATION.

1. **Will your second band participate? (Yes) _____(No) _____ (If "Yes", submit next page)**
2. Name of School_____
3. Band Director_____Tel_____
4. Email Address:_____Cell Phone No._____
5. Principal _____Tel_____

_____Number of Band members participating in the State **Marching** Band Evaluation @ **$5.00** each, including auxiliaries, and drum major(s) ……....$_____

_____ Drum major(s), **only if to be adjudicated,** @ **$5.00** each …….... ….$_____

__X__ Required **Concert Site Fee** – Pearl, Tupelo, Oak Grove (Circle one)……..$**75.00**

TOTAL AMOUNT REMITTED ----------$_____

Make Check / Purchase Order to MHSAA

6. School Classification _____ (6A, 5A, 4A, 3A, 2A, 1A)
   (Higher Classification if you choose)
7. Drum Major(s) Name(s)

   _____

Complete and mail form/fees/P.O. to:
MHSAA
Attn. Jeff Cannon
P.O. Box 127
Clinton, MS 39060
Fax 601.924.1725

8. **Number of Concert Band Members** _____
9. Our school is _____ miles from **Concert Site**
10. MARCHING SITE _____

MHSAA Office Use Only

Check No._____ Date_____

From_____

P. O. No._____ Date_____

Amount_____

_____
Principal's Signature

_____
Band Director's Signature

COMPLETE THIS FORM AT BEGINNING OF THE YEAR AND SEND TO MHSAA BY SEPTEMBER 15TH

SECOND BAND PARTICIPATION

All schools with second bands participating in the State Band Evaluation must complete this form and return to the MHSAA no later than **September 15, 2015.** Please read Section F, Rule 7 (f) regarding high school second bands.

Name of School_____

Name of Second Band Director _____Cell phone _____

Name of Principal _____ Telephone _____

_____Number of concert second band members participating

_____ Number of marching second band members participating, including drum major(s)

Drum Major(s) Name(s)_____

School Classification _____ (6A, 5A, 4A, 3A, 2A, 1A)

PERFORMANCE PREFERENCE:

_____ Same day as first band

_____ Within class

_____ First day of your region

Complete and mail / Fax form to:
MHSAA
Attn: Jeff Cannon
P.O. Box 127
Clinton, MS 39060
Fax 601.924.1725

_____
Principal

_____
Band Director

MHSAA BAND ELIGIBILITY LIST - OPTIONAL

NOTE: PLEASE CHECK WITH YOUR PRINCIPAL OR ATHLETIC DIRECTOR ABOUT THE NEW C2C ELIGIBILITY SOFTWARE PROGRAM BEFORE YOU SUBMIT THIS LIST. IF THEY ARE NOT SET UP TO MARK YOUR BAND STUDENTS YET, I WILL TAKE A FAXED LIST FOR FIRST SEMESTER. YOU MAY SEND US ANY COMPUTERIZED LIST/CLASS ROSTER AND ATTACH IT TO THIS FORM, WITH SIGNATURES. NO BIRTH CERTIFICATE NUMBERS NEEDED.

LAST NAME	FIRST NAME	INITIAL	YR. IN SCHOOL

_____ _____ _____

SCHOOL PRINCIPAL BAND DIRECTOR

Please complete by September 15. If you need additional time, please let Diane know by email dbruser@misshsaa.com or phone, 601.924.6400.

Mississippi Bandmasters Association

www.msbandmasters.com

MBA DUES INVOICE

Mississippi Bandmasters Association Membership Dues allow Director attendance and student participation at the Mississippi Bandmasters State Clinic and all membership privileges as outlined below.

MBA Membership Dues Classifications:

Full-time Band Directors @ $80.00 each.
Student and Associate level @ $40 each. *(for teacher interns and adjunct staff)*
Retired Band Directors @ $40 each. (No voting rights)
MBA Past-President / Lifetime Member @ $0.00

PURCHASE ORDER #:_____

BILL TO:

Please list director names and school affiliations below.		
Director Name	**Amount**	**School Affiliation**
TOTAL INVOICE: $_____		

Please remit payment to:

Len Killough
1st Vice President, MBA
Hernando High School
Dilworth Lane
Hernando, MS 38632

Mississippi Bandmasters Association

www.msbandmasters.com

MBA State Band Clinic Student Fee Invoice

INVOICE

PO #_____

Please Complete the following information:

School Name:_____

Band Director Name:_____

MBA State Band Clinic Student Fee is $120 per student for the clinic.
Optional Wednesday Night Fee is an additional $50 per student for housing on Wednesday night.

Item	Quantity (No. of Students)	Cost Per Student	Total Cost
Student Clinic Fee	_____	X $120 =	$_____
Wednesday Night Fee	_____	X $50 =	$_____
	GRAND TOTAL:		$_____

Please remit payment to:

Mississippi Bandmasters Association
Len Killough
1st Vice President, MBA
805 Dilworth Lane
Hernando, MS 38632

Mississippi Bandmasters Association

www.msbandmasters.com

MHSAA / MBA State Marching Evaluation Invoice

INVOICE

PO # _____

Please Complete the following information:

School Name(s):_____
Band Director(s) Name:_____

State Marching Evaluation Fee @ $200 per band

Quantity (No. of Bands)	Cost ($200 per band)	TOTAL COST
_____	X $200 =	$_____

Please remit payment to your Evaluation Site:

Region I
Tupelo High School Band
4125 Cliff Gookin Blvd
Tupelo, MS 38801-8978
Rick Murphy, Director
662-841-8975 – Fax 662-841-8987

Region II
Grenada High School Band
1875 Fairground Rd
Grenada, MS 38901-5216
Chris Sumrall/Kim Presley, Site Coordinators
662-226-4355 – Fax 662-227-6102

Region III
Neshoba Central High School Band
1125 Golf Course Rd.
Philadelphia, MS 39350
Daniel Wade, Director
601-656-3127

Region IV
Pearl High School Band
500 Pirate Cove
Pearl, MS 39208-4031
Matt Rowan, Director
601-932-7939
Fax 601-932-7992

Region V
Gulfport High School Band
100 Perry St
Gulfport, MS 39507-1903
Wes Morehead, Director
228-896-7878
Fax 228-896-8281

MAIL TO YOUR ASSIGNED REGIONAL SITE WITH YOUR $200 ENTRY FEE PAYABLE TO YOUR REGIONAL SITE.

Mississippi Bandmasters Association

www.msbandmasters.com

MHSAA / MBA State Marching Championship Invoice

INVOICE

PO # _____

Please Complete the following information:

School Name(s):_____
Band Director(s) Name:_____

State Marching Championship Entry Fee @ $250 per band

Quantity (No. of Bands)	Cost ($250 per band)	TOTAL COST
_____	X $250 =	$_____

Please remit payment to:

Mississippi Bandmasters Association
Len Killough
1st Vice President, MBA
805 Dilworth Lane
Hernando, MS 38632

Form **W-9**
(Rev. December 2014)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above
Mississippi Bandmasters Association

3 Check appropriate box for federal tax classification; check only **one** of the following seven boxes:
☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate
☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶
Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.
☐ Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
Exempt payee code (if any)
Exemption from FATCA reporting code (if any)
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.)
805 Dilworth Lane

Requester's name and address (optional)

6 City, state, and ZIP code
Hernando, MS 38632-8732

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number
			–			–				

or

Employer identification number
7	4	–	3	1	0	2	3	8	1

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person ▶ Len Killough Date ▶ 7-13-17

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at *www.irs.gov/fw9*.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.