

**ENROLLMENT FORM FOR THE
NORTH CAROLINA DISTRICT CONCERT BAND MPA**

The undersigned hereby makes application to enter the _____ Middle School in the District Concert Band Music Performance Adjudication to be held at the **Wingate University**.

Enclosed find a check or money order for \$ 160.00, the amount of the registration fee.

Grade of Music _____ Number in Ensemble _____

Total number of students from this school entering the MPA event _____

Grade level of students in organization _____

I have carefully read the NCMEA Concert Band MPA Rules and Regulations and will be guided thereby.

Date: _____

Name of Director

****Preferred Performance Day & Time****

Mailing Address

City Zip

School Phone Home Phone

Email Address

This blank must be mailed to the MPA Chairperson.

DEADLINES WILL BE STRICTLY ADHERED TO.

I hereby certify that all students enrolled from this school to appear in the District Music MPA are eligible according to the regulations of eligibility.

School Principal

March: _____

Composer: _____

First Selection: _____

Composer: _____

Second Selection: _____

Composer: _____