

# 2017 Commitment Form

Requirements of Young Musicians Honor Choir Members:

1. PAYMENT OF REGISTRATION FEE of \$70 (non-refundable) BY FEBRUARY 10, 2017.

Registration Fee includes: All meals (students only)

Snacks

Concert Polo Shirt

Music and listening CD

DVD of the program and Sunday morning worship

2. REQUIRED Rehearsals: Attend at least ONE of the two scheduled rehearsals in February and March 2017. Every effort will be made to ensure that they are centralized to your location. You may attend both. Roll will be taken. These rehearsals will be led by a minister of music or choir leader at an area church. There may be several of these rehearsals on the same date throughout the state which should be helpful to you. Dates and locations for these rehearsals will be emailed to you.

3. Each student should make every effort to memorize their music. No music will be used during the concert or worship service over the weekend. Students must keep up with their own music at all times.

4. Students are to remain on campus at all times and will be under the supervision of team members, church staff, and the visiting choral director.

5. Students must attend ALL activities of the honor choir weekend, including ALL Saturday activities, Saturday evening concert and Sunday morning worship. NO EXCEPTIONS.

6. NO parents will be allowed in any rehearsals or worship arts activities. Meals are for registered students and faculty only.

By signing below, you have read and agree to all of these requirements.

\_\_\_\_\_ Date: \_\_\_\_\_  
Choir Member Name (Print)

\_\_\_\_\_ Music Leader/Teacher Signature  
Parent Signature

\_\_\_\_\_ Music Leader/Teacher PRINTED Name  
Parent's PRINTED Name

Mississippi Baptist Young Musicians Honor Choir  
MEDICAL INFORMATION FORM  
March 25-26, 2017

Please complete the following form by printing the information required.

Honor Choir Participant

Name \_\_\_\_\_

Gender: \_\_\_\_\_ Age \_\_\_\_\_ (by March 25, 2017)

Birthdate \_\_\_\_\_

Home

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Contact Phone #: \_\_\_\_\_ Is this a cell? \_\_\_\_\_ Yes \_\_\_\_\_ No

**EMERGENCY CONTACT:**

Mother/Guardian: \_\_\_\_\_ Phone #: \_\_\_\_\_

Father/guardian: \_\_\_\_\_ Phone #: \_\_\_\_\_

Alternate contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

Relationship: \_\_\_\_\_

**HEALTH HISTORY**

Please list any health concerns including allergies (drug, insect, environmental) that may affect your child while at the Honor Choir Weekend. Please remember to pack all of your necessary medications. Use the back if there more space is needed.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IMPORTANT: The local MEA Clinics are not open on weekends, but we will have medical personnel on site at the church for the entire weekend. This is a skilled, trained professional in the health field. Choir medical personnel have my permission to administer over the counter medications to meet the needs of \_\_\_\_\_ . If a medical emergency

(Student's Name)

should arise while my son/daughter is participating in the 2017 Mississippi Baptist Young Musicians Honor Choir Weekend, and I cannot be contacted; I hereby give permission to Wyndy South and the medical personnel to select a physician if necessary or hospital for his/her care.

Also, I will assume primary responsibility for any medical bills for the student named above. In consideration of the permission extended to my son/daughter by the Church Music Department, Mississippi Baptist Convention Board to participate in the activities of the 2017 Mississippi Baptist Young Musicians Honor Choir, I hereby release and hold harmless the Mississippi Baptist Convention Board or FBC, Clinton, their officers, directors, agents, employees, property owners, instructors and associates of and from any and all manner of actions and causes of actions, judgments, executions, debts, claims and demands of every kind and nature whatsoever which against them I have had or now have of which I or my heirs, executors or administrators have now or may hereafter have by reason of my son's/daughter's participation in the 2017 Mississippi Baptist Young Musicians Honor Choir. The undersigned hereby declares that the terms of the herein release and information disclosed have been completely read, and are fully understood and voluntarily accepted.

Date \_\_\_\_\_ Most accessible phone # \_\_\_\_\_

Printed Name:

\_\_\_\_\_

Signature \_\_\_\_\_ Relationship \_\_\_\_\_  
Parent or Guardian



## TALENT RELEASE for MINORS

I, \_\_\_\_\_, as Guardian of  
(please, print)

\_\_\_\_\_, hereby expressly grant the  
(please, print)

Mississippi Baptist Convention Board (MBCB), and its employees, agents, and assigns, permission to photograph me and use my photographs, motion picture, audio or video tapes of which the above minor(s) is a part and further acknowledge that his/her participation is voluntary for which they will receive no compensation. I hereby release any claims of ownership of said items and release MBCB and its representatives from liability for any claims made by me or any third party in connection with the above. I also agree that they will not participate in any other television or radio production, such as gaming or other type commercials, in which their image or use might reflect negatively towards the Mississippi Baptist Convention Board.

This, the \_\_\_\_\_ day of \_\_\_\_\_, 2017

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(address)

\_\_\_\_\_  
(city, state, zip)

\_\_\_\_\_  
(telephones)