

OHIO MUSIC EDUCATION ASSOCIATION

OMEA MARCHING BAND LOCAL EVENT APPLICATION

EVENT NAME: _____

EVENT CHAIR: _____

HIGH SCHOOL: _____ HS PHONE: _____

HS FAX: _____ CHAIR EMAIL: _____

HS ADDRESS: _____

CITY: _____ ZIP: _____

CHAIR HOME ADDRESS: _____

CITY: _____ ZIP: _____ HOME PHONE (_____) _____

Additional Contact Name & Phone: _____

First Date Choice: _____ Second Date Choice: _____

Start Time: _____ Start Time: _____

Stadium Seating _____ (Home Side) _____ (Visitor Side)

Ratings or Ratings and Rankings: _____ OMEA District/Region: _____

Stadium Checklist: Please verify that your stadium and performance or warm up areas can accommodate the following:

Adequate Press Box Accommodations with Open Windows: _____

Adequate Pit Percussion Area Including Staging Access: _____

Adequate Flow In and Out of Stadium for Bands: _____

Adequate Warm-Up Areas for Band(s): _____

Adequate Bus and Equipment Vehicle Parking: _____

Adequate Stadium Parking for Spectators: _____

Adequate Handicap Accessibility: _____

By agreeing to all of the above statements, the local event chair and administrator signatures provided below, certify that this site will be able to provide a quality music education performance environment for all participants and spectators. The chair also agrees to have all organizational aspects covered in a timely manner and to prepare all workers associated with the event in order to follow OMEA Guidelines as listed in *TRLAD*, the current handbook and/or the management booklet for the event. The local event chair agrees to attend a summer continuing education session in 2008.

This application must be returned to David Handshue, OMEA MB Affairs Chair, 3263 Darby Glen Blvd., Hilliard, Ohio 43026 no later than Tuesday, January 5, 2010. Failure to comply will result in no sanction for your event.

PRINCIPAL OR SUPERINTENDENT: _____ Date _____

BAND DIRECTOR: _____ Date _____

