<div align="center">

KCDA ALL-STATE HONOR CHOIR ACCEPTANCE LETTER
REGISTRATION FORM
POSTMARK DEADLINE APRIL 30, 2021

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CONGRATULATIONS!! You have been chosen to be a member of the KCDA All-State Honor Choir to be held in Topeka, Kansas on July 8-9, 2021. The venue for the convention is the Capitol Plaza Convention Center, 1717 SW Topeka Blvd, Topeka KS. The venue for the rehearsals is Topeka High School 800 SW 10th Street, Topeka KS.

Please complete the information on the form below, the medical release form and liability waiver along with the **$60.00 non-refundable Participation Fee,** and return them **postmark deadline: April 30, 2021.** You, your family, or your teacher will need to call the Capitol Plaza Convention Center (800.579.7937) as soon as possible to make your reservation for the honor choir**.** You are welcome to stay at an alternative location in Topeka or nearby. Bus transportation will be available to shuttle students between the hotel and Topeka high school on Friday, July 9.

Please check **all** that apply:

_____I will be participating in the KCDA All-State Tenor/Bass or Soprano/Alto Choir.

_____I will not be able to participate in the honor choir.

_____I am a four year member of the KCDA Tenor/Bass or Soprano/Alto Choir.

Music, part assignments, rehearsal information, schedules and directions will be sent to your teacher/
director as soon as we receive your acceptance letter and participation fee. We look forward to meeting you this summer!

Singer Responsibilities include:
1) Learning and memorizing their music **as assigned**
2) Providing a black, three ring binder to hold their music, rehearsal notes, two pencils and water bottle.
3) Performance Attire:
   - *For the Soprano/Alto Choir*: Providing the following performance dress: **long** black dress or **long** black skirt and black top, black shoes;   Please be modest in your performance dress. Clothing is to be **all black, no prints, designs, jackets or wraps in other colors**. Please don't wear one-shoulder designs.
   - Hair will be worn up and out of the face; make-up and jewelry are to be kept minimal.
   - *For the Tenor/Bass Choir*: Providing the following performance attire: **black dress pants (no jeans), black socks, black dress shoes, long sleeve white button-up shirt, and black tie.**
4) Cost of lodging and meals on Thursday and Friday breakfast. (Lunch is provided both days.)
5) Any behavior deemed unacceptable at the discretion of the chair will result in immediate dismissal from the choir.

__Print__ your name as you wish it to **appear in the program**:

_____

__Print__ the name of your Choral Director/Teacher:

_____

__Print__ the email address where YOU can be reached during the summer:

_____

__Your cell phone number:__ _____
We are providing lunch both days, as well as a snack before the concert. Please plan ahead if you have specific needs. We are not able to accommodate special food needs because of the number of students involved but will try to have a variety of options available to the best of our ability.

Please identify any important changes in the application information. (Such as change of address, phone number, chaperone, etc.):_____

LIABILITY WAIVER

This document must be notarized.

I hereby release, indemnify and hold harmless the Kansas Choral Directors Association ("KCDA"), its trustees, employees, volunteer workers, students, agents and assigns from any and all liability, damage, Covid 19, claim of any nature whatsoever arising out of or in any way related to my/my child's participating in the **KCDA All-State Soprano/Alto and Tenor/Bass Honor Choir** at the KCDA State Convention in Topeka, Kansas, July 8-9, 2021.

Participating in any activity is an acceptance of some risk of injury. I agree that my/my child's safety is primarily dependent upon him/her taking proper care of self. Despite precautions, accidents and injuries may occur and injury and/or loss or damage to personal property may occur as a result of participation in the **KCDA All-State Soprano/Alto and Tenor/Bass Honor Choir**; therefore, I assume all risks related to participation in the **KCDA All-State Soprano/Alto and Tenor/Bass Honor Choir**. I also hereby acknowledge that the Kansas Choral Directors Association, its trustees, employees, volunteer workers, students, agents and assigns assume no liability whatsoever for personal injuries or property damage that may arise out of my/my child's participation in the **KCDA All-State Soprano/Alto and Tenor/Bass Honor Choir** at the KCDA State Convention in Topeka, Kansas, July 8-9, 2021.

Reasonable precautions will be taken to provide for the student's safety. I request that the pupil be transported by school bus on Friday, July 9, 2021 between the convention center and performance venue and we relieve and absolve the Kansas Choral Directors Association, its trustees, employees, volunteer workers, students, agents and assigns of any responsibility.

My signature on this form indicates that I have read, understood and freely signed this WAIVER. I expressly agree that this agreement shall be construed and enforced in accordance with laws of the state of Kansas, with Shawnee County being the court of exclusive jurisdiction, and I consent to the jurisdiction of the state of Kansas and of the courts of Shawnee County. I agree that this waiver and release is intended to be as broad and inclusive as permitted under the laws of the state of Kansas so that if any portion hereof is held invalid, the balance shall continue in full legal force and effect.

_____
(Name of Singer)

_____
(Signature of Parent or Legal Guardian)

Signed in my presence this_____ day of (month & year)_____.

Witness my hand and seal this_____ day of (month & year) _____

*Notary Public:_____

My Commission expires:_____

Notary Seal:

This document must be notarized.

KCDA All State Soprano/Alto and Tenor/Bass Honor Choir
MEDICAL PERMISSION FORM
July 8-9, 2021, Topeka, Kansas

Please print or type:

Participant's name_____
                (Last)   (First)   (Middle Initial)

Participant's Health Insurance Co. _____

_____
                (Name and Policy/Group numbers)

I am currently taking the following prescription medication(s):

_____

List any other medications you might be taking below:

Known allergies_____

My physician's name_____

Address of physician_____
          (Street)   (City)   (State)   (Zip)

Physician's office phone (   ) _____

If the participant listed above, should require medical attention while participating in the KCDA All State Soprano/Alto and Tenor/Bass Honor Choir in Topeka, Kansas, July 8-9, 2021, the designated Honor Choir Chair or Honor Choir Chair Assistant, or the designated chaperone (if other than parent), has my permission to treat onsite or take said child (listed above) to a doctor, hospital, or any other medical facility for necessary medical treatment.

Parent/Guardian Signature_____

Signed in my presence this_____ day of (date & year) _____.

Witness my hand and seal this_____ day of (date & year)_____

*Notary Public: _____

My Commission expires: _____

Notary Seal:

This document must be notarized.

Please mail the first three pages to your appropriate Honor Choir Chair!

Soprano/Alto Choir Chair	Tenor/Bass Choir Chair
Amy Ives	Randall Frye
105 S Logan	1400 Massachusetts St.
Newton, KS 67114	Lawrence, KS 66047
amy.ives@usd373.org	rfrye@usd479.org

If you have any questions please don't hesitate to contact us!