

2019

ATSSB Outstanding Performance Series

Entry Verification Form

Collin Anderson, OPS State Chair



Name of school _____ Class _____ Region _____

Name of ensemble _____ Var. NV

If middle school, name of high school(s) this school feeds _____

Director of ensemble _____ ATSSB # _____
(number only: 19xxxx)

Director email _____

Administrator _____ Prin. Supt.

Administrator Telephone _____ Email _____

1A - Title of selection _____

ONLY COMPLETE THIS BLOCK IF ENTERING A MARCH

Composer/Arranger _____ Publisher _____

Contest, Date and Location at which selection was recorded _____

1B - Title of selection _____

ONLY COMPLETE THIS BLOCK IF ENTERING A CONCERT SELECTION

Composer/Arranger _____ Publisher _____

Movements played (if applicable) _____

Contest, Date and Location at which selection was recorded _____

1C - Title of selection _____

ONLY COMPLETE THIS BLOCK IF ENTERING A SECOND CONCERT SELECTION

Composer/Arranger _____ Publisher _____

Movements played (if applicable) _____

Contest, Date and Location at which selection was recorded _____

ENTRY PROCEDURES: This completed and signed form, along with a check made out to "ATSSB" totalling to \$60 per entry, must be mailed on or before the deadline, to:

You may also pay online; however, your entry will not be complete until this form is received and fees paid.

Do not require a signature.

OPS 2018
2117 Morse Street
Houston, Texas 77019

Use Delivery Confirmation
if desired.

RELEASE

Our signatures on this entry form signify the accuracy of the above information to the best of our knowledge and that our school is classified in the conference for the current school year as listed above. No special recording techniques, microphone placements, or other techniques that might enhance the recording were used other than those ordinarily provided by the recording technicians for all bands recorded at this event. In submitting this audio file for consideration, we give up any right to any fees or proceeds that might result from the future sale of any product using this recording. We release ATSSB and its agents, assigns, representatives, and coordinators from any liability resulting from the sale or use of this audio file in any way so long as said sale or use is approved by the State Board of Directors of ATSSB. We also release ATSSB and its agents, assigns, representatives, and coordinators from any liability resulting from files lost or inadvertently erased in transit, or accidentally damaged in playback. We understand that no audio files will be returned.

Administrator _____

Date signed _____

Band Director _____

Date signed _____