

**Pennsylvania Music  
Educators Association**

# **FEST EVENT RESOURCE GUIDE**



**May 2004**

**Sponsored by  
The Curriculum/Instruction  
Committee**

# TABLE OF CONTENTS

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|                                                               |          |
|---------------------------------------------------------------|----------|
| Purpose.....                                                  | 1        |
| History.....                                                  | 1        |
| Organizational Items.....                                     | 2        |
| Planning Timeline.....                                        | 3        |
| One Year Before the Festival.....                             | 3        |
| Six to Nine Months Before the Festival.....                   | 3        |
| Three to Six Months Before the Festival.....                  | 4        |
| Zero To Three Months Before the Festival.....                 | 4        |
| Following The Festival.....                                   | 4        |
| Forms.....                                                    | 5-12     |
| Preliminary Budget Worksheet (sample).....                    | 5        |
| Student Application/Teacher Evaluation Form (sample).....     | 6        |
| Registration Invoice (sample).....                            | 7        |
| Fest Event Insurance Form.....                                | 8        |
| Fest Student Participation Fee Form.....                      | 9        |
| Student Medical/First Aid Form.....                           | 10-11    |
| Final Financial Report Form.....                              | 12       |
| Act 48 Guidelines/Procedures.....                             | 13       |
| Act 48 Sample Roster.....                                     | 14       |
| Act 48 Pa. Department of Education Evaluation Form.....       | 15       |
| Guest Conductor Contract.....                                 | 20       |
| *W-9 Form (for Guest Conductors paid over \$600).....         | Attached |
| Mechanical Rights Release Form (required for recordings)..... | 21       |

\*W-9 form is not included in the pdf version of this packet. It can be obtained from the IRS website: [www.irs.gov](http://www.irs.gov)

## ***PURPOSE***

Because music aptitude is strongly influenced by childhood experiences, the Curriculum/Instruction Committee of the Pennsylvania Music Educators Association has created the Elementary and Middle School Fest Events to provide a strong, musical experience unavailable to children in the typical elementary school setting. The goal is to establish an abiding love for the art of music through a positive, musically-rewarding format. It is the firm commitment of the Committee that these events be available to every child in the Commonwealth and, in fact, PMEA support of Fest Events is contingent upon the potential inclusion of every eligible student in the sponsoring PMEA district.

## ***HISTORY***

The Fest Events began as an Elementary All-Star Sing concept in Union City, Pennsylvania initiated by Rosemary Obert, Jerry Black, Annette Rilling and Rick Scaletta. Since that first Event, the Elementary All-Star Sings have evolved to include choral, band and string ensembles across the Commonwealth of Pennsylvania. Hopefully these events will serve as a national model as well.

### **ORIGINAL COMMITTEE:**

Robert K. Reid, Chair  
Cak Marshall  
Adeline Bethany

Rick Martin  
George Fennell  
Jean Hormell

## ***DEFINITION***

A Music Fest shall be defined as a one-day event which places equal emphasis on music education experiences as well as performance.

## ***NAMING YOUR EVENT***

Music Fests shall be titled as follows:

|                          |                            |      |
|--------------------------|----------------------------|------|
| _____                    | _____                      | Fest |
| (grade level)            | (type)                     |      |
| Elementary/Middle School | Song/Band/String/Orchestra |      |

# *ORGANIZATIONAL ITEMS*

1. **Eligibility:** Fest Events must be open for participation to every school within the PMEA district. The district C/I Committee, in cooperation with the host, will establish fair and equitable quotas for the participating school districts. Each PMEA district should create a system that addresses its particular situation. Quota formulas could include:

- representation by participating school district.
- representation by participating director.
- representation by number of classes per grade level/s.
- representation by buildings within a district.
- representation by grade level within one building.
- representation by gender.
- representation by voice part.
- representation by any combination of the factors listed above.

2. **District C/I Committee Involvement:** The district-level Curriculum/Instruction Committee must be an integral part of the planning for any Fest Event. There is a wealth of information and assistance available through the district's State Chair.

3. **PMEA Membership:** It has been the custom that PMEA membership is optional for the first Fest Event held within a district. Every participating, non-PMEA member director must pay a \$5.00 fee to PMEA in order to participate in the first event. However, for ensuing Events, directors must be PMEA members in order for their students to participate.

4. **Financial Assistance:** Through the C/I activities fund, PMEA offers financial assistance to local districts to establish the first Fest Event. It is the opinion of the State Committee that the Events should become self-sufficient within two or three years of inception. Furthermore, any financial assistance from PMEA funds is available only through the district C/I committee and will not be awarded to any Event in which the Committee is not a central part of the planning.

5. **Profits:** Although it is not the purpose of the Fest Events, most realize a small profit. Any moneys remaining after all obligations have been met should be forwarded to the district treasurer. In this way funds will be available for future Events and can aid in keeping student fees to a minimum. Further, the profits may be utilized in the development of a music library for use in future Fest Events and to function as a lending library for use by PMEA-member teachers.

# ***PLANNING TIMELINE***

## **One Year Before the Festival**

1. Choose a host school.
2. Select a date (consult PMEA calendar to avoid conflicts).
3. Establish a budget.
4. Choose a guest conductor.
5. Determine the number of participating students, school quotas and criteria for selection.
5. Select the program.

## **Six to Nine Months Before the Festival**

1. Send letters of invitation to directors and administrators (It is particularly important to include administrators in the planning stages if this is the first elementary festival.) The first letter should contain the following information:
  - date of festival
  - schedule of activities for the entire event
  - cost per student
  - a statement that all directors **MUST** be PMEA members
  - application, medical and director preference forms
  - criteria for student selection
2. Finalize program
  - work in cooperation with guest conductor
  - decide if music will be memorized
  - determine system for distribution
3. Arrange clinic for the directors. The district C/I committee can be a valuable resource
4. Make arrangements for food service.
5. Complete PMEA forms and return to the Executive Office.
6. Hire a proficient accompanist.
7. Prepare practice tapes for every director (optional).

## **Three to Six Months Before the Festival**

1. Select participating students and send the lists to their directors.  
Include in the mailing the following:
  - student/parent information packets
  - dress/conduct code
  - director information (map/directions, schedules, etc.)
2. Order awards (certificates, ribbons, etc.)
3. Order tickets, programs and any other printed material
4. Prepare student and director packets
  - items from local merchants (pencils, pens, note pads, etc.)
  - include extra student schedule
5. Contact district C/I chair to request funds for directors' workshop
6. Prepare agenda, snacks and guest conductor evaluation forms for the directors' meeting
7. If Act 48 hours are to be offered, follow guidelines for sending information to the PMEA Executive Office. Contact clinicians if added workshop is to be offered.

## **Zero to Three Months Before the Festival**

1. Confirm use of activity areas (pool, rehearsal site, student changing areas, director meeting room/clinic site)
2. Arrange for proper equipment and helpers
  - risers
  - piano
  - podium
  - blackboards
  - medical personnel
  - ushers
  - sound system
  - chairs
  - music stands (if necessary)
  - custodial help
  - parking
  - registration help
3. Finalize food service arrangements
4. Order or make decorations
5. Arrange for media coverage
  - submit newspaper articles and pictures
  - apprise radio and television stations of the event and request public service announcements
6. Finalize and order programs
7. Finalize schedule

## **Following the Festival**

1. Send thank you notes to all who helped.
2. Pay all bills.
3. Send final budget financial report to the PMEA Executive Office and to your PMEA district secretary/treasurer. Check with your PMEA district secretary/treasurer concerning the district policy on any profits that may have accrued.
4. Remember - tie up all loose ends as soon as possible.

SAMPLE FORM

PRELIMINARY BUDGET WORKSHEET

EXPENDITURES

|                                               |       |
|-----------------------------------------------|-------|
| MUSIC                                         | \$    |
| HONORARIA                                     |       |
| Conductor                                     | \$    |
| Clinician/s                                   | \$    |
| Entertainment                                 | \$    |
| Accompanist                                   | \$    |
| POSTAGE                                       | \$    |
| PMEA INSURANCE                                | \$    |
| PRINTING (certificates and programs)          | \$    |
| MEALS                                         | \$    |
| PMEA STATE STUDENT PARTICIPATION FEE          |       |
| @ \$1.00 per student                          | \$    |
| PMEA NONMEMBER FEES @ \$5.00 per director     |       |
| (One time only fee, sent to the State Office) | \$    |
| DECORATIONS (flowers, balloons)               | \$    |
| MISCELLANEOUS                                 | \$    |
|                                               | <hr/> |
| TOTAL EXPENDITURES                            | \$    |

INCOME

|                |       |
|----------------|-------|
| REGISTRATION   | \$    |
| TICKET SALES   | \$    |
|                | <hr/> |
| TOTAL RECEIPTS | \$    |

SAMPLE FORM

**FEST EVENT  
STUDENT APPLICATION FORM**

NAME OF STUDENT \_\_\_\_\_ GRADE \_\_\_\_\_ AGE \_\_\_\_\_

STUDENT'S ADDRESS \_\_\_\_\_

PARENT/GUARDIAN \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

TEACHER \_\_\_\_\_ SCHOOL \_\_\_\_\_

SCHOOL ADDRESS \_\_\_\_\_

SCHOOL PHONE \_\_\_\_\_ HOME PHONE \_\_\_\_\_

TEACHER'S HOME ADDRESS \_\_\_\_\_

MENC I.D. # \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

\*\*\*\*\*

**STUDENT RECOMMENDATION**  
(To Be Completed by the Teacher)

Voice Part/Instrument \_\_\_\_\_

|                      | superior | very good | good | fair | poor |
|----------------------|----------|-----------|------|------|------|
| ATTENTION SPAN       | ( )      | ( )       | ( )  | ( )  | ( )  |
| GENERAL BEHAVIOR     | ( )      | ( )       | ( )  | ( )  | ( )  |
| MUSICAL APTITUDE     | ( )      | ( )       | ( )  | ( )  | ( )  |
| MUSICAL KNOWLEDGE    | ( )      | ( )       | ( )  | ( )  | ( )  |
| MUSICIANSHIP         | ( )      | ( )       | ( )  | ( )  | ( )  |
| TONE QUALITY         | ( )      | ( )       | ( )  | ( )  | ( )  |
| PITCH DISCRIMINATION | ( )      | ( )       | ( )  | ( )  | ( )  |
| MUSIC READING SKILLS | ( )      | ( )       | ( )  | ( )  | ( )  |

COMMENTS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SAMPLE FORM

FEST EVENT  
REGISTRATION INVOICE

SCHOOL\_\_\_\_\_

TEACHER\_\_\_\_\_

STUDENTS AND PART:

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

TOTAL AMOUNT DUE @\$10 PER STUDENT:\_\_\_\_\_

Make checks payable to PMEA District 27

Mail Checks to:

Miss Someone  
Anywhere, PA 00000

PENNSYLVANIA MUSIC EDUCATORS ASSOCIATION  
INSURANCE FORM  
FOR  
FEST EVENTS (one day festivals)

DATE TODAY \_\_\_\_\_

DISTRICT \_\_\_ ELEMENTARY FEST/MIDDLE SCHOOL FEST (circle one)

FESTIVAL DATE(S) \_\_\_\_\_

Host's Name \_\_\_\_\_

Host School \_\_\_\_\_

School Address \_\_\_\_\_

\_\_\_\_\_

zip code

Host's Phone:

Home \_\_\_\_\_ School \_\_\_\_\_

Host's Email ad-

dress \_\_\_\_\_

**PAYMENT OF \$25, PAYABLE TO PMEA, IS DUE  
ONE MONTH PRIOR TO THE FESTIVAL.**

This insurance covers liability, no bodily injury. The policy covers PMEA in this regard. BE CERTAIN TO REMIND YOUR PARTICIPANTS THEY MUST CARRY FAMILY MEDICAL OR SCHOOL INSURANCE TO ATTEND THIS FESTIVAL. WE ARE NOT RESPONSIBLE FOR INJURIES.

Mail form with payment to:

Margaret S. Bauer, CAE, Executive Director  
Pennsylvania Music Educators Association  
56 S. Third St.  
Hamburg, PA 19526

**PENNSYLVANIA MUSIC EDUCATORS ASSOCIATION**

**FEST PARTICIPATION FEE FORM**

Return this form and a check for the full amount payable to:

**Pennsylvania Music Educators Association  
56 S. Third St.  
Hamburg, PA 19526**

**DUE WITHIN TWO WEEKS OF FESTIVAL**

Include one copy of concert program.

BAND - CHORUS - ORCHESTRA-JAZZ

DISTRICT

\_\_\_\_\_  
Identify

\_\_\_\_\_  
(Arabic)  
District

Name of School\_\_\_\_\_

School Address\_\_\_\_\_

Host's Name\_\_\_\_\_

Number of Students Participating (Including Host's Students)\_\_\_\_\_ Total\_\_\_\_\_

SEND A COPY OF PROGRAM WITH PAYMENT\_\_\_\_\_ Date

The State student participation fee for fests is \$1.00 per student.  
Hosts are required to include the state fee for each of their students also.



STUDENT MEDICAL

INFORMATION FORM

**PENNSYLVANIA MUSIC EDUCATORS ASSOCIATION**  
FORM REVIEWED/APPROVED BY PENNSYLVANIA HOSPITAL ASSOCIATION

Student Name \_\_\_\_\_ Date \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_

Date of birth \_\_\_\_\_ Grade \_\_\_\_\_

Home Address:

\_\_\_\_\_

Street

\_\_\_\_\_

City, State, Zip Code

\_\_\_\_\_

Area Code/Phone number

Director's Name \_\_\_\_\_ School \_\_\_\_\_

Father's Full Name \_\_\_\_\_

Work Phone \_\_\_\_\_ Hours \_\_\_\_\_

Mother's Full Name \_\_\_\_\_

Work Phone \_\_\_\_\_ Hours \_\_\_\_\_

Stepparent/Guardian's Full Name \_\_\_\_\_

Work Phone \_\_\_\_\_ Hours \_\_\_\_\_

Is the student currently under medical treatment? YES NO

If yes, give the nature of the treatment and the doctor's name and phone number:

\_\_\_\_\_

Is the student currently taking any medication? YES NO

If yes, give the name of the medication, reason it is given, doctor's name and phone number:

\_\_\_\_\_

List any ailments of which the school nurse or medical personnel should be made aware (allergies, diabetes, heart condition, etc.)

\_\_\_\_\_

Is your child allergic to: \_\_\_\_\_ Pets \_\_\_\_\_ Cigarette/Pipe Smoke \_\_\_\_\_ Food: Please list specific food allergies: \_\_\_\_\_

Date of last tetanus shot: \_\_\_\_\_ 10 \_\_\_\_\_



**Return Within 30 Days of Festival**

**PENNSYLVANIA MUSIC EDUCATORS ASSOCIATION**

**FEST (Band/Chorus/Orchestra/Jazz) FINANCIAL REPORT FORM**

This form is to be completed by the District and/or Region Host within thirty (30) days of the conclusion of the event and sent to the PMEA Executive Office, 56 S. Third St., Hamburg, PA 19526. Also send a copy to the District President and/or Secretary.

EVENT \_\_\_\_\_ DATES \_\_\_\_\_  
DISTRICT/REGION \_\_\_\_\_ **EXPENDITURES:**

HOST'S NAME \_\_\_\_\_ Music \$ \_\_\_\_\_

SCHOOL ADDRESS \_\_\_\_\_ Honoraria  
\_\_\_\_\_  
Conductors \_\_\_\_\_  
Clinicians \_\_\_\_\_  
Entertainment \_\_\_\_\_  
Accompanist \_\_\_\_\_

**RECEIPTS:**

\_\_\_\_\_ @ \$ \_\_\_\_\_ = \_\_\_\_\_  
No. Students (Registration fee)

\_\_\_\_\_ Concert Tickets

\_\_\_\_\_ No. \_\_\_\_\_ @ \_\_\_\_\_ = \_\_\_\_\_

No. \_\_\_\_\_ @ \_\_\_\_\_ = \_\_\_\_\_

Postage \_\_\_\_\_

PMEA Insurance \_\_\_\_\_

Printing \_\_\_\_\_

Meals \_\_\_\_\_

PMEA student participation fee \_\_\_\_\_

PMEA Non-member fees \_\_\_\_\_

Decorations \_\_\_\_\_

OTHER \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TOTAL RECEIPTS \_\_\_\_\_

TOTAL EXPENDITURES \_\_\_\_\_

PROFIT \_\_\_\_\_ or NET LOSS \_\_\_\_\_

(Check with your PMEA District Secretary/Treasurer concerning district policy if a profit has resulted)

## Act 48 Guidelines/Checklist

1. Send your schedule of the activity, including a time schedule and number of Act 48 hours requested, to the PMEA Executive Office, 56 S. Third St., Hamburg, PA 19526 **AT LEAST 30 DAYS IN ADVANCE OF THE FESTIVAL, CLINIC, WORKSHOP, etc. Please note that there is a MAXIMUM of 2 hours per day (6 days total for a 3 day festival; 2 hours total for a 1 day festival) available for Guest Conductor Observation.**

\_\_\_\_2. Send a biography/resume of your clinician(s), presenter(s), conductor(s), etc. to the PMEA Executive Office, 56 S. Third St., Hamburg, PA 19526 **AT LEAST 30 DAYS IN ADVANCE OF THE EVENT.** Biography must include professional degrees, current position and qualifications to present.

\_\_\_\_3. At the event, please use the PDE Roster format (attached) to have your members sign in to the event. Keep track of exactly how many hours each participant earns. Yes, some members cheat and leave after signing the rosters. It is not fair to PMEA or to the other professionals attending to grant credit when it is not honestly earned.

\_\_\_\_4. Submit the roster, along with the official PDE evaluation form (attached) submitted by each participant to the PMEA Executive Office, 56 S. Third St., Hamburg, PA 19526 **within 30 days of the conclusion of the event.** Be certain that ALL names and addresses are legible; if necessary, type the roster and submit the typed roster along with the original roster. PLEASE do not wait until the 30th day to send the roster. The PMEA Executive Office has only 30 days from the date of the event to upload the roster and our work schedule, especially in the spring, usually doesn't permit us to type the roster and upload it immediately. Ideally, if you would type the roster in the Excel format shown on the next page and email it to: msbauer@comcast.net, the records would be immediately uploaded to the Department of Education.

We will not be able to offer credit if these guidelines are not followed. I will refer questions to the appropriate district president and/or C/I rep if a member requests credit for an event for which an advance schedule/bio and/or roster has not been submitted.

We would greatly appreciate your cooperation and understanding as we comply with PDE's requirements for granting Act 48 activity hours.

Thanks!

COMMONWEALTH OF PENNSYLVANIA – DEPARTMENT OF EDUCATION  
**CONTINUING PROFESSIONAL EDUCATION LEARNING EXPERIENCE EVALUATION**

PDE-3527 (1/00)

**Title of Activity**

**Dates**

**Instructor(s)**

Please respond to each item by circling the number which best describes your opinion. (5 = Excellent through 1 = Poor.)

**A. Course/activity Content**

**Excellent**

**Poor**

- |                                                                                         |   |   |   |   |   |
|-----------------------------------------------------------------------------------------|---|---|---|---|---|
| 1. Course/activity was well organized.                                                  | 5 | 4 | 3 | 2 | 1 |
| 2. Course/activity objectives were clearly stated.                                      | 5 | 4 | 3 | 2 | 1 |
| 3. Activities and assignments were relevant to objectives.                              | 5 | 4 | 3 | 2 | 1 |
| 4. All necessary materials/equipment/resources were provided or made readily available. | 5 | 4 | 3 | 2 | 1 |
5. Which form(s) of evaluation were used to assess your achievement of the learning experience's objectives?  
 Please check as many as applicable.

- |                                                  |                                                 |
|--------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Abstracts               | <input type="checkbox"/> Lesson plan            |
| <input type="checkbox"/> Exam                    | <input type="checkbox"/> Report                 |
| <input type="checkbox"/> Journal                 | <input type="checkbox"/> Term paper             |
| <input type="checkbox"/> Project(s)              | <input type="checkbox"/> Plan of implementation |
| <input type="checkbox"/> Observation             | <input type="checkbox"/> Practicum              |
| <input type="checkbox"/> Other (please specify): |                                                 |

6. Additional comments:

**B. Course/activity Instruction**

**Excellent**

**Poor**

- |                                                                          |   |   |   |   |   |
|--------------------------------------------------------------------------|---|---|---|---|---|
| 1. The instructor was well prepared for class.                           | 5 | 4 | 3 | 2 | 1 |
| 2. The instructor was knowledgeable in the subject area.                 | 5 | 4 | 3 | 2 | 1 |
| 3. The manner of presentation of the material was clear.                 | 5 | 4 | 3 | 2 | 1 |
| 4. The instructor employed effective teaching strategies/techniques.     | 5 | 4 | 3 | 2 | 1 |
| 5. The instructor was objective and equitably interacted with the class. | 5 | 4 | 3 | 2 | 1 |

6. Additional Comments:

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### **C. Questions**

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Please take a few moments to respond to the following questions. Your answers will greatly assist us in determining how to improve continuing professional education course offerings.

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1. What were the strengths of this course/activity?
  
2. What were the weaknesses?
  
3. Could this course/activity have been more helpful to you? Please specify.
  
4. Should this course/activity be offered again?
  
5. What changes would you recommend?
  
6. If this course/activity is offered again, should the same instructor teach it?
  
7. Did the course/activity announcement/description statement have enough information for you to make a sound enrollment decision?
  
8. What (if any) changes would you suggest for the course/activity announcement/description?
  
9. What other course/activity subject matter would interest you?
  
10. Can you recommend future instructors?

**D. Additional comments:**

**Important Note: IF YOU DO NOT FILL OUT COLUMNS B THROUGH G THE NAME AND/OR ADDRESS OF THE EDUCATOR WILL NOT APPEAR ON THE ATTENDANCE LETTER.**

| SSN                      | First Name | Last_Name | Address            | City                 | State | Zip Code | Activity Name | Activity Type | Total |
|--------------------------|------------|-----------|--------------------|----------------------|-------|----------|---------------|---------------|-------|
| Activity Hours/Date From |            | Date To   | Hours Attended/ Cr | Course ID“(If Known) |       |          |               |               |       |
| 000-00-000               | Jane       | Doe       | 123 Main St.       | Anywhere             | PA    | 19000    |               |               |       |
| 000-00-000               | John       | Doe       | 123 Main St.       | Anywhere             | PA    | 19000    |               |               |       |
| 000-00-000               | Sally      | Smith     | 56 S. Third St.    | Hamburg              | PA    | 19526    |               |               |       |

This is simply a SAMPLE roster to show you what is needed by the PA Department of Education.

The official PDE roster form can be found at:  
[www.pde.state.pa.us](http://www.pde.state.pa.us)

Follow the links for the Act 48 Records Management System.

You do not have to require PMEAs members to sign a roster which would put their social security numbers in view of other members. You can use index cards, collect them, and personally fill out the roster in Excel before sending it to the PMEA Executive Office.

It is ESSENTIAL that you collect social security number, first and last names, complete street address, city, state and zipcode. We cannot process the roster if there is any part of the above missing. Thanks.

## W-9 Forms

All guest conductors who are paid more than \$600 must complete IRS Form W-9 and return it to the host director. At the end of your school district's fiscal year (June 30), your district must file IRS Form 1099 to report the guest conductor's fee to the IRS.

For those festival hosts who run their expenses through their PMEA district treasury, the W-9 form should be sent to the PMEA Executive Office. PMEA will take care of filing the Form 1099 for you, once we receive the W-9 and a copy of your guest conductor contract.

If you have any questions about form W-9, please call Margaret S. Bauer, Executive Director, at 610-562-9757 or 888-919-PMEA (7632).

The Internal Revenue Service W-9 form may be found at:

***[www.irs.gov](http://www.irs.gov)***

Search for the form by number (W-9) and it will bring up a copy of the form that you can print off and give to your guest conductor (if the stipend is \$600 or above).

We apologize for the inconvenience, but we cannot duplicate the IRS form in the CD format of this document. Please call the PMEA Executive Office if you are not able to secure a W-9 form online and we will be happy to mail you the form.

# PENNSYLVANIA MUSIC EDUCATORS ASSOCIATION GUEST CONDUCTOR AGREEMENT

Identify District, Region, All-State

Band, Orchestra, Chorus, Jazz

Festival Dates

Name of Host

School (Festival Location)

Home Phone

School Phone

School Address

Street

City

Zip Code

## IN COMPLIANCE WITH PRIOR ARRANGEMENTS,

\_\_\_\_\_ agrees to fulfill duties related to the preparation of participants as an educational experience which is musically enriching, agrees to adhere to host's rehearsal schedule, agrees to conduct concerts scheduled by the host, agrees to broadcasts, telecasts, and non-profit recordings to be made at the discretion of host, agrees to refrain from summer school activity/tour promotion and/or college recruitment during rehearsal time, and grants host permission to use his/her name in advertising the concerts, and thereby agrees to furnish photograph/vita.

Rehearsal begins \_\_\_\_\_<sup>Time/Date</sup> and extends to \_\_\_\_\_<sup>Time/Date</sup>

in accordance with a rehearsal schedule furnished by host.

The following concerts are scheduled: \_\_\_\_\_<sup>Time/Date</sup>

\_\_\_\_\_<sup>Time/Date</sup>

\_\_\_\_\_<sup>Time/Date</sup>

## SELECTION OF MUSIC. Host checks one procedure which will apply to this festival.

\_\_\_\_\_ (a) The conductor agrees to use pre-selected music literature (list attached).

\_\_\_\_\_ (b) The conductor agrees to use pre-selected music literature (list attached) and will choose \_\_\_\_\_<sup>number</sup> additional selections to complete the program.

\_\_\_\_\_ (c) The conductor will collaborate with host and/or a coordinator in selecting the entire program.  
(U.S. Copyright Law shall be strictly enforced)

**CONDUCTOR'S HONORARIUM** in the amount of \_\_\_\_\_ is payable before departure.

## EXPENSE REIMBURSEMENT: TRAVEL AND MEALS

Travel Plane, Economy Class ticketed no less than 14 days out. Airport bus/limo (no taxi reimbursement exceeding bus/limo rate)

Check here: Host will meet plane \_\_\_\_\_  
Yes No

— Car --@\$.375 per mile

Meals Breakfast \$7.00 Maximum. Other meals are furnished by the school; if not, the PMEA per diem allowance is \$30.00

Host does not reimburse personal phone calls, hotel incidentals, luxury car rental, or unrelated charges not agreed to in advance of signing contract.

## PROVISION FOR LIQUIDATED DAMAGES IN THE EVENT THE CONDUCTOR FAILS TO APPEAR

Inasmuch as the breach of the Agreement by the conductor will cause serious substantial injury to the festival host/coordinator, and because it will be difficult if not impossible to prove the amount of such damage, the conductor hereby agrees that in the event of a breach of this agreement on his/her part, he/she will pay to the festival host the sum of \_\_\_\_\_ dollars (proposed honorarium plus \$250) within ten days after such breach, as liquidated damages, such sum being agreed by the parties hereto as the amount which the festival host will be damaged by the breach of this Agreement on the part of the conductor.

## PROVISION FOR CANCELLATION

**CONDUCTOR MAY CANCEL THIS AGREEMENT** under circumstances which are beyond his/her control such as hospitalization, physical disability, serious illness or death in the immediate family, train or plane cancellation/accident. Documented proof is required.

**HOST MAY CANCEL THIS AGREEMENT** under circumstances which are beyond his/her control, such as fire, flood, war, riot, labor dispute or epidemic at location of festival. Documentation is required.

**IN THE EVENT OF CANCELLATION OF THIS AGREEMENT**, the party so cancelling shall notify the other party at the earliest possible date prior to the festival. Proper cancellation by mutual agreement relieves the other party of all obligations.

\_\_\_\_\_  
Signature (Conductor)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

Conductor's phones \_\_\_\_\_

Business \_\_\_\_\_

Home \_\_\_\_\_

\_\_\_\_\_  
Signature (Host)

\_\_\_\_\_  
Date

Conductor will sign both copies and return them to the festival host or coordinator immediately. The original copy will be signed by host and returned to conductor.

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Hosts: It is recommended that the recording company be a sustaining member of PMEA. (See list in *PMEA News*)

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PENNSYLVANIA MUSIC EDUCATORS ASSOCIATION  
**MECHANICAL RIGHTS FORM**

All festival hosts are required to complete the section which applies to procedure which was elected by the respective PMEA district. **Prepare Section I; fill in festival identification at bottom.**

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**Section I**

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**Recording Company Secures Mechanical Rights**

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The following named recording company has obtained a license from publishers prior to the festival. We agree to abide by the license requirements furnished by the publishers whether it be payment of a fee or sending a copy of the recording, or both, directly to the publisher or the license clearing house. A recording fee is charged to the host to cover licensing fees or we will absorb such fees as part of production costs. In either case, we agree to pay licensing fees directly. Additionally, we will collect the cost per copy of the recording from the participants and will distribute the recordings by mail. (PMEA is hereby discharged from the legal responsibility for 'Mechanical Rights of Recording.')

|                                              |               |                                                   |                   |
|----------------------------------------------|---------------|---------------------------------------------------|-------------------|
| **<br>_____<br>Signature, Festival Host      | _____<br>Date | **<br>_____<br>Signature, Recording Company Owner | _____             |
| _____<br>Type/Print Name of Festival Host    |               | _____<br>Type/Print above Signature               | _____<br>Date     |
| **<br>_____<br>Signature, District President |               | _____<br>Company Address                          | _____             |
|                                              |               |                                                   | _____<br>Zip Code |
| ** Signatures on all copies for legibility   |               | Company is a current sustaining member _____      | _____             |
|                                              |               |                                                   | Check             |

|                              |                                           |                         |
|------------------------------|-------------------------------------------|-------------------------|
| _____<br>District / Region # | _____<br>Band / Orchestra / Chorus / Jazz | _____<br>Name of School |
| _____<br>School Address      |                                           | _____<br>School Phone   |

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**Instructions**

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The festival host prepares this form, obtains signature of recording company owner (if it applies), signs all copies\* and mails them (intact) to the District President 30 days prior to the festival. (Region State festival host also mails the completed form to the President of the District in which the region event is held.) The District President signs all copies and distributes them immediately as follows: Send white copy to the PMEA Executive Office, return yellow copy to festival host, send pink copy to the recording company; the District President retains the gold copy. **THE RECORDING COMPANY IS INSTRUCTED NOT TO MAKE A RECORDING OF THE CONCERT UNLESS THE PINK COPY HAS BEEN RETURNED IN ADVANCE OF CONCERT DAY.**

\*If you are downloading this form, you will need to make 3 additional copies of the form to follow the instructions, above.