

Texas Coalition for Quality Arts Education
Arts Education Days at the Capitol
March 4–5, 2015

STUDENT PERFORMANCES

Application Form

Name of Group: _____

Teacher's Name(s): _____ # Students _____

School: _____ District: _____

School Address: _____

City: _____, TX Zip Code: _____

Phone: _____ Fax Number: _____

Teacher's Email Address: _____

Director of Fine Arts' Name: _____

Director's Address: _____

City: _____, TX Zip Code: _____

Phone: _____ Fax Number: _____

Director's Email Address: _____

Principal's Name: _____ Email: _____

Superintendent's Name: _____ Email: _____

Superintendent's Address: _____

City: _____ TX Zip Code: _____

Phone: _____ Fax Number: _____

DEADLINES: Student Performances Application Form with **audio recording (music), video DVD (dance/theatre), photograph and one-page description. The application deadline has been extended to **December 10.****

The TCQAE Board will determine final selections of performing groups. **Notification** as to whether or not a **performing group** is selected will be made by December 16, 2014.

Send to: Robert Floyd, TCQAE Chair, P.O. Box 140465, Austin, TX, 78714

Texas Coalition for Quality Arts Education

Arts Education Days at the Capitol

NEW DATES! March 4-5, 2015

Hold Harmless Agreement

In consideration of the acceptance of this entry, I/we the undersigned, assume full and complete responsibility for any injury or accident that may occur during my/our participation in Arts Education Days at the Capitol, Mar. 4–5, 2015, or while I/we am/are on the premises of this event. And I/ we hereby release and hold harmless the Texas Coalition for Quality Arts Education, sponsors, promoters, and all the other persons and entities associated with this event from any and all injury or damage, whether it be caused by negligence of the sponsors or promoters or other persons or entities associated with this event or their agents or employees or otherwise.

Organization/School: _____

School District: _____

Group Name: _____

Teacher/Sponsor Name: _____

Signature: _____

Principal Name: _____

Signature: _____

Date: _____

Deadline: February 2, 2015

Send to: Robert Floyd, TCQAE Chair
Texas Coalition for Quality Arts Education
P.O. Box 140465
Austin, TX 78714

Contact: Phone: 512-452-0710, x101—Fax: 512-451-9213—rfloyd@tmea.org