Mississippi ACDA High School Solo & Ensemble

MASTER ROSTER

INSTRUCTIONS: See current issue of the ACDA Contest Regulations**.**

School _____ Choral Director _____

Address _____ City/Zip _____

Date _____ ACDA Membership # _____

List contestants in ALPHEBETICAL ORDER by EVENT

NAME OF CONTESTANT	GRADE IN SCHOOL	EVENT	CLASS (1,2,3)

I hereby certify that each of the students named heron is eligible under the regulations for this competition and will compete in accordance with said regulations**.**

DATE_____ Director's Signature _____

List of contestants in Alphabetical Order by Event (continued)

NAME OF CONTESTANT	GRADE IN SCHOOL	EVENT	CLASS (1,2,3)