**Tournament Indoor Association—Allegheny Mountain Region**

**2015 Indoor Unit Registration Form and Dues Receipt**

\*Complete the form below to enroll your school/organization in the 2014 Tournament Indoor Association Allegheny Mountain Region.

\*Submission of this form, along with the $100 annual membership (which covers all units from your school/organization for the entire season), and a $50 one-time performance bond (new units only), will permit your group to compete in all TIA-sanctioned events throughout nine mid-Atlantic states. Return form/payment to the address at bottom of this form.

\*Please review the indoor rulebook, found at www.tobxi.com in the tab for WINTER.

**COMPLETE A SEPARATE FORM FOR EACH INDOOR UNIT FROM YOUR SCHOOL/ORGANIZATION**

School/Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Director: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please choose the **ONE** selection for each item below. (*visit* **www.njatob.org** *for descriptions/explanations*)

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| ***Division*** | *🞏 Scholastic 🞏 Independent* | | |
| ***Genre*** | *🞏 Color Guard 🞏 Twirling 🞏 Dance 🞏 Percussion* | | |
| ***Classification*** | *🞏 World*  *🞏 Open*  *🞏 University* | *🞏 Senior*  *🞏 A*  *🞏 Intermediate A (CG and P Only)* | *🞏 Novice*  *🞏 Middle/Junior*  *🞏 Elementary/Cadet* |

**PLEASE RETURN THIS FORM AND YOUR CHECK**(if required) to ***TOB CHAPTER XI* BY January 1, 2015**

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| **Please mail by January 1, 2015 to:**  **Doug Williams**  **2748 S Rosegarden Blvd**  **Mechanicsburg PA 17055** | **For more information:**  **Email: tobchapterxi@gmail.com**  **Phone: 814-659-0035**  **TOB Website: www.njatob.org**  **Allegheny Mountain Region Website: www.tobxi.com** |

Your prompt reply with payment will allow you to be listed as a current member of TOB/TIA and inclusion in the 2015 roster. Your students will become eligible to perform in the all-star band and for consideration of chapter and association scholarships. Additionally, your group will receive clinic and seminar information, and will be eligible for all other privileges included with paid membership.

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| --- | --- | --- | --- |
| ***2015 ROSTER—Scholastic Units please list grade level of performers / Independents Units please list age of performers*** | | | |
| ***Student/Performer*** | ***Grade/Age*** | ***Student/Performer*** | ***Grade/Age*** |
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***NO ADDITIONS CAN BE MADE TO THE ROSTER AFTER APRIL 1 (see www.njatob.org for rulebook)***

***Units can have no more than 30 or less than 5 members on the roster (see www.njatob.org for world class exemption)***

***Carry a copy of your roster to each contest***

***Unit Director: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Administrator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_***