

Student Involvement Form

83rd Annual Conference

Kentucky School Boards Association

February 22 – 24, 2019

Galt House East, Louisville



83RD ANNUAL CONFERENCE | FEB. 22-24, 2019

Type or clearly print all information. To submit a proposal for consideration, please complete all the information below and return by mail (260 Democrat Drive, Frankfort, KY 40601) or fax (502-783-2704). All submissions must be received by October 26, 2018. The conference will be February 22-24, 2019 at Louisville's Galt House.

1. Name of School District: _____

2. Involvement Type:

- Musical Performance (Instrumental) Student-Led Devotional (Sunday)
 Music al Performance (Vocal) Other (please specify): _____

3. Length of performance (if applicable): _____ minutes

4. Size of Group:

- Solo Small Group (10 or less) Large Group (more than 10 but maximum of 30)
If a group performance, number of members: _____

5. Performer(s) Grade Level:

- High School Middle Elementary Preschool

6. Title of Group OR Name of Soloist: _____

7. Presentation Description (limit of 25 words): Please proofread your abstract. This will appear as written in the conference program. KSBA reserves the right to edit descriptions.

8. Preferred Date to Perform:

- Friday, February 22 Saturday, February 23 Sunday, February 24
 Available any date

9. Audiovisual/Staging Needs: _____

Please be mindful that all equipment is a rental expense for the conference. As we try to keep participant registration fees low, please request only what is going to be used. Requests made on the day of the conference will not be honored. District is responsible for any equipment or instruments it brings.

10. Name of Adult Leader: (Note: District is responsible for providing sufficient supervision of any minors they bring to the conference. Minors must be supervised at all times.)

Name: (Dr., Mrs., Ms. Miss, Mr.): _____

Job Title: _____ Organization/Agency: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

Signature of Director/Adult Sponsor: _____ Date: _____

Phone (if not the accompanying leader): _____

Signature of Superintendent: _____