



NEMBDA

NORTHEAST MISSISSIPPI BAND DIRECTORS ASSOCIATION

Honor Band Clinic Invoice

School District: _____

Registration fees for honor band clinic are **\$25.00** per student.

An additional **\$25.00** per student may be paid if students would like a meal ticket.

Purchase Order # _____

Student Name	Instrument	Meal Ticket

Total Amount Paid \$ _____

Please make payments to: NEMBDA

Email: robin.hill@leecountyschools.us ; Phone: 662-891-8745