



CONGRATULATIONS

**You have been selected
to the 2017 Mississippi
All State Choir!**

Congratulations! You have been conditionally selected for the *Mississippi All State Choir*. My name is Courtney Clements. My husband, Mack, and I run Chi Alpha @ Ole Miss and I am also your choir director! Let me tell you a little bit about the choir:

- Everyone selected for the choir will be in high school, grades 8-12, or will be a leader in Chi Alpha @ Ole Miss.
- We will tour for one week in the summer, ministering every night at a different church in Mississippi
- We will do a lot of our practice at youth camp "Collide". Because of this, camp is strongly suggested for everyone going on choir tour. You can go with your church, go by yourself, or go with another church.
- To move from conditionally selected to an approved choir member, you must turn in a completed application on time, along with the application fee, and your application must be approved (with positive pastor and youth pastor references).
- I will notify you via text as I receive the different parts of your application.
- Once approved, you will receive a CD in the mail and more details about the tour. You will be expected to know every song on the CD by the time you arrive for tour.

I cannot wait to see you at camp, if you can make it, and begin working on the music! Mississippi is going to be greatly impacted for the kingdom of God on this tour. I believe we will see people healed, filled with the Holy Spirit, and their lives radically changed during our tour. Not only will others be impacted, you will never be the same after only one year on tour! We will train you in altar working, teach you discipleship tools, give you a college mentor, and you will make friendships that will last a lifetime!

You will see more information on the following page. If you have any questions, please do not hesitate to text me (479-799-7414) or e-mail me at OleMissXA@gmail.com (Add me on facebook too: Courtney Hoover Clements)! Please provide your parents with my number and email so that they can contact me with any questions they have!

Yours for the University,

Courtney Clements

Chi Alpha Campus Missionary @ Ole Miss, OleMissXA.org

All State Choir Director: Mississippi Assembly of God

Assembly of God [Nationally Appointed Missionary Account #295540](http://NationallyAppointedMissionaryAccount.com)

Email: OleMissXA@gmail.com | Courtney: (479) 799-7414

NEXT STEPS – DUE DATES & FEES

MAY 20 REGISTRATION DEADLINE FOR YOUTH CAMP “COLLIDE” \$198 early bird cost
*Camp is ***STRONGLY SUGGESTED!*** You can register at www.collidesummercamp.org

JUNE 1 APPLICATION FORMS AND NON-REFUNDABLE FEE \$25 application fee

\$25 due *You must fill out this paper application and send back to:
Chi Alpha @ Ole Miss | 1246 Westbrook Ave | Oxford | MS | 38655
*Make Checks payable to Chi Alpha.
*Please be certain that your Liability/Consent are sent to me.
*Pastor and Youth Pastor reference forms must also be received by this date.

JUNE 19-23 YOUTH CAMP “COLLIDE” @ Hinds Community College in Jackson, MS

JULY 1 CHOIR TOUR FEE DUE \$100 tour fee due

\$100 due *Send to: Chi Alpha @ Ole Miss | 1246 Westbrook Ave | Oxford | MS | 38655
*Make Checks payable to Chi Alpha (this is an in-house date, not a postmark date)
*The only money students will need in addition to this is money for lunches each day (fast food), three meals on off day, and any spending money they want throughout the week.
*Students will stay in pairs with host families each night provided by the church we will be ministering at. The local pastors hand select trusted families for students to stay with.

JULY 21-30 ALL STATE CHOIR TOUR!!!!!!!!!! 2017 TENTATIVE TOUR SCHEDULE

****This is an example*** of what our tour will look like. During the day: travel, set up, sound check

Friday	July 21	CHOIR arrive in Jackson by 1:30 PM
Saturday	July 22	Practice ALL Day!
Sunday	July 23	AM – Church Service PM – Church Service
Monday	July 24	Church Service
Tuesday	July 25	Church Service
Wednesday	July 26	Church Service
Thursday	July 27	Church Service
Friday	July 28	Day Off!
Saturday	July 29	Church Service
Sunday	July 30	AM – Church Service PM – Church Service pick-up immediately following service

If you would like your home church to host one of the services, please provide your pastor with Mack’s contact information: 479-595-4444 and have him call/e-mail to invite us. This does not guarantee that we will be able to schedule your church, but there is a higher probability with an invitation!

Again, if you have any questions, PLEASE just e-mail or text me! I love texting, so don’t think you’re “bothering me” by sending me a text – just tell me who you are!

IMPORTANT DEADLINE INFORMATION

If accepted, please adhere closely to the payment deadline above.
In the event you miss a deadline, you will need to notify the office as to the reason.
Alternates will be considered if consistent deadlines are missed.

FOR OFFICE USE ONLY

New member: ☐

Date Received: _____

Amt. Enclosed: _____

MISSISSIPPI ALL STATE CHOIR APPLICATION

Please attach
a current
photo here.

*Your application and reference forms must be **RECEIVED** by **June 1, 2017**. Please attach a current photo. PLEASE PRINT LEGIBLY (If I cannot read it, you'll have to resend it)!!!*

YOUR INFORMATION

Name: First _____ Middle _____ Last _____

Home Address: _____ City _____ State _____ Zip _____

Birth date: _____ / _____ / _____ Age _____

E-Mail Address: _____

Phone(s): **CELL:** (____) _____ - _____ **OTHER:** (____) _____ - _____

Insurance Company: _____ Policy No. _____

T-Shirt size: _____ (S, M, L, XL, XXL, etc.)

FAMILY INFORMATION

Father _____ Work #: _____ Cell # _____

If address is same as above, leave next line blank. If different, please provide the address.

Address: _____ City _____ State _____ Zip _____

Mother _____ Work #: _____ Cell # _____

If address is same as above, leave next line blank. If different, please provide the address.

Address: _____ City _____ State _____ Zip _____

REFERENCE INFORMATION

PASTOR _____ Church _____ Phone _____
FIRST NAME LAST NAME

Address _____ City _____ State _____ Zip _____

E-mail Address _____

YOUTH LEADER _____ Phone _____
FIRST NAME LAST NAME

Address _____ City _____ State _____ Zip _____

E-mail Address _____

EDUCATION INFORMATION

What year of school will you have completed May/June 2017? _____

Are you considering attending Ole Miss for college? ☐ YES ☐ NO

MUSICAL INFORMATION

1. Which part do you sing? ☐ SOPRANO ☐ ALTO ☐ TENOR ☐ BASS ☐ DON'T KNOW

Do you hear harmony naturally? ☐ YES ☐ NO ☐ DON'T KNOW

3. Are you involved in your church/youth music program? ☐ YES ☐ NO

If yes, in what way? _____

HEALTH INFORMATION

1. Are you in excellent health? ☐ YES ☐ NO

If no, please explain _____

2. Do you have any physical handicaps? ☐ YES ☐ NO

If yes, please explain _____

3. Do you have any specific diet requirements? ☐ YES ☐ NO

If yes, please explain your diet requirements _____

SPIRITUAL INFORMATION

1. Your individual spiritual experience:

- a. Year you were saved _____
- b. Have you been baptized by submission in water? ____YES ____NO
- c. Filled with the Holy Spirit? ____YES ____NO (year)
____NO

2. Your reason(s) for wanting to participate in this choir tour: *(be precise, but brief)*

PROMOTIONAL RELEASE

I, _____, hereby consent to the use of any videotapes, photographs, slides, audiotapes, or any other visual or audio reproduction in which I may appear by the Mississippi Assemblies of God Youth Ministries or Chi Alpha Christian Fellowship at the University of Mississippi. I understand that these materials are being used for promotion of the Mississippi Assemblies of God Youth Ministries and Chi Alpha at the University of Mississippi, which includes recruitment and fund-raising efforts.

I release the Mississippi Assemblies of God Youth Ministries and Chi Alpha Christian Fellowship at the University of Mississippi from any liability connected with the use of my picture or voice recording as part of any promotional, recruitment, or fund-raising program.

Date ____/____/____

Student's Signature _____

Parent/Guardian Signature _____

ENCLOSE YOUR \$25.00 APPLICATION FEE AND RETURN ALL FORMS BY *June 1, 2017*.

MAKE CHECKS PAYABLE TO CHI ALPHA

***Mail to:* CHI ALPHA @ OLE MISS
1246 Westbrook Ave. Oxford MS 38655**

SIGNATURE: _____ DATE: ____/____/____

**Mississippi All State Youth Choir
Liability Release/Consent to Participate
Medical Release**

***If you are under the age of 18, please have your parents or legal guardian fill out the following.
If you are 18, you may fill out and sign for yourself. This form must be notarized.***

LIABILITY RELEASE & CONSENT TO PARTICIPATE

I/We _____ and _____, being the parents or legal guardians of _____ a minor of _____ years of age, consent and agree that said child may participate with the Mississippi All State Youth Choir sponsored by Chi Alpha at the University of Mississippi and the Youth Department of the MISSISSIPPI DISTRICT COUNCIL OF THE ASSEMBLIES OF GOD, **July 21 - July 30, 2017**, to various locations; and I/we hereby release the Mississippi District Council of the Assemblies of God, its agent, assigns, employees and volunteer assistants from any liability whatsoever arising out of injury, sickness, or damage which may be sustained by said child during the course of said trip.

MEDICAL RELEASE

I/We _____ and _____, being the parents or legal guardians of _____, do further give my/our consent for the director or properly appointed sponsor of the All State Youth Choir of the MISSISSIPPI DISTRICT COUNCIL of the ASSEMBLIES OF GOD to secure the administration of medical treatment or medication for the above named child, and I/we do further agree to the performance of such treatment, anesthetics, and operations as in the opinion of the attending physician is deemed necessary for your child.

List any medication or treatment that should not be given to my student because of dangerous reactions.

Dated ____ / ____ / ____ Signed _____ Signed _____
(Parent or Guardian) (Parent or Guardian)

(If at all possible, we request both parents sign this release and have form Notarized below.)

STATE OF _____

COUNTY OF _____

I HEREBY CERTIFY THAT ON THIS DAY, BEFORE ME, A NOTARY DULY AUTHORIZED IN AND FOR SAID STATE AND COUNTY DO ACKNOWLEDGE, PERSONALLY APPEARED _____ TO ME KNOWN TO BE THE PERSON WHO EXECUTED THE FOREGOING INSTRUMENT AND ACKNOWLEDGED BEFORE ME THAT THEY/HE/SHE EXECUTED THE SAME.

WITNESS MY HAND AND OFFICIAL SEAL THIS _____ DAY OF _____,
201__, A.D.

NOTARY PUBLIC



ALL STATE CHOIR PASTOR REFERENCE



PASTOR'S REFERENCE FORM

***Please return this form
before June 1, 2017***

Return to:

Chi Alpha @ Ole Miss

Mack and Courtney Clements

1246 Westbrook Ave. Oxford MS 38655

Applicant's Name: _____

Dear Pastor:

We are looking for quality young people to serve as All State Choir Members. Since it is impossible for us to become personally acquainted with all the applicants, we must rely on your recommendation. Please share your **honest** opinions.

We would appreciate your confidential comments on the applicant's maturity, stability, temperament, ability to adjust to new situations, physical stamina and any other traits or qualities, which might be assets or liabilities. Exposure to pressures, cultural shock and physical stress places a great demand on the character and disposition of each applicant. Serious consideration will be given to your comments; therefore, your cooperation in completing this form as candidly and prayerfully as possible will be greatly appreciated.

1. How long have you known the applicant? _____

How well do you know him/her? (*Check one*)

____ The applicant is my child!!!

____ Fairly well, with numerous personal contacts

____ Very close pastoral relationship

____ Only by name and sight

____ Casually, with a few personal contacts

2. Has the applicant demonstrated a personal commitment to Jesus? ____Yes ____No ____I am unsure

3. State briefly your opinion of his/her dedication to Christ: _____

4. What special talents and or abilities has he/she shown? _____

5. Is he/she in good health, to your knowledge? _____

6. Does he/she have any emotional, mental or physical handicaps? _____

7. Is he/she recognized by the youth of the church as an outstanding Christian? _____

Please check the following:	EXCELLENT	GOOD	FAIR	POOR
Motivated by love for Christ and souls	_____	_____	_____	_____
Ability to get along with others	_____	_____	_____	_____
Follows through on instructions	_____	_____	_____	_____
Leadership ability	_____	_____	_____	_____
Teachable	_____	_____	_____	_____
Personal appearance	_____	_____	_____	_____
Emotional stability and behavior	_____	_____	_____	_____
General attitude	_____	_____	_____	_____
Attitude toward opposite sex	_____	_____	_____	_____
Common Sense	_____	_____	_____	_____
Obedience to rules	_____	_____	_____	_____
Faithfulness to church	_____	_____	_____	_____
Faithfulness to youth activities	_____	_____	_____	_____

To what extent is applicant engaged in church activities?

- ☐ Attends regularly, enthusiastically and deeply involved
 ☐ Attends regularly, willing to help.
- ☐ Attends regularly, seldom participates in activities.
 ☐ Attends irregularly, minimal participation.
- ☐ Attends irregularly, no participation.
 ☐ Unknown

What type of spiritual influence is applicant to peers?

- ☐ Strengthening
 ☐ Negative
 ☐ Neutral
 ☐ I don't know

To your knowledge, does the applicant smoke? ☐ Yes ☐ No ☐ Unsure

To your knowledge, does the applicant drink? ☐ Yes ☐ No ☐ Unsure

To your knowledge, is the applicant sexually active? ☐ Yes ☐ No ☐ Unsure

Would you recommend the applicant to XA ASC?

- ☐ Wholeheartedly
 ☐ With some hesitation
 ☐ No

If No, Why? _____

☐ I need to be personally contacted regarding this individual.

Contact me at (____)____-_____

Date: ____/____/____ Pastor's Signature: _____



ALL STATE CHOIR YOUTH PASTOR REFERENCE



YOUTH PASTOR'S REFERENCE FORM

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before June 1, 2017**

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Mack and Courtney Clements
1246 Westbrook Ave. Oxford MS 38655**

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If No, Why? _____

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Contact me at (____)____-_____

Date: ____/____/____ Pastor's Signature: _____



ALL STATE CHOIR



LIL' SIB SURVEY

- Name: _____
- Favorite Sonic drink: _____
- Favorite soda: _____
- Favorite chips: _____
- Favorite snack food: _____
- Favorite candy: _____
- Non-musical Hobbies: _____

- Favorite Christian Music Artist: _____
- What's your love language? (select one or two)
 - ☐ Words of affirmation
 - ☐ Thoughtful gifts
 - ☐ Acts of service
 - ☐ Quality time
 - ☐ Physical touch
- Favorite sport: _____
- What are you hoping to do on tour?
 - ☐ Drama/Skit
 - ☐ Just sing
 - ☐ Step
 - ☐ Interpretive dance
 - ☐ Something else? _____