



# Missouri Music Educators Association

*A Federated State Association of the National Association for Music Education*

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## **MMEA WEBSITE INSTRUCTIONS CLINICIAN/SERVICES AGREEMENT (CONTRACT)**

*Revised for 2025 Conference*

**The following procedure is to be used by all MMEA Board of Directors and Advisory Council members that have secured service agreements for their respective areas to be presented at the annual MMEA In-Service Workshop/Conference.**

1. Select the “About MMEA” section from the Home Page of the MMEA Website.
2. Select “MMEA Administration Resources” from the MMEA Administration Section.
  - a. Login to the to the Leadership Hub using your MMEA Office Login.
3. Locate your office page and select the link to access the “Administrative Page” for your office.
4. Scroll to the bottom of the page and select “Conference Administration.”
5. Download the appropriate *blank* Clinician Agreement document.
6. Save and rename the blank document directly to your computer.
7. Open the document from your computer.
8. Complete all relevant information pertaining to the terms of the agreement.
  - a. ***Do Not Sign this copy.***
9. Save the completed agreement to your computer.
10. Select the “Clinician Contract/Agreement Form” tab in the *Clinic/Session Administrative Forms* section.
11. Complete all information on the online form.
12. Upload the completed agreement that was saved to your computer.
13. Click “Submit” to submit the contract agreement.
14. Paul Swofford will process the paperwork and send a copy of the completed agreement (via email) to be *electronically signed* by all parties.
15. Electronically sign and submit the completed contract.

***More detailed instructions are included below.***

# Online Submission of Contract Agreements

1. Select “About MMEA” from the MMEA Home Page



2. Select “MMEA Administration Resources” and enter the password to enter the Leadership Hub.

## MMEA ORGANIZATIONAL STRUCTURE

[MMEA Organizational Structure Outline](#)

[MMEA Governing Documents](#)

[MMEA Strategic Plan 2020-2022 \(Draft\)](#)

[MMEA Board of Directors Meetings](#)

[MMEA Committee Review Resources](#)

## MMEA ADMINISTRATION

[MMEA Administration Resources](#)



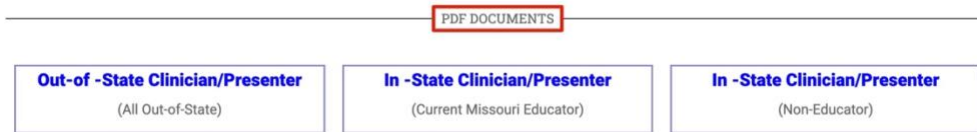
3. Locate your officer page and select the link to access the “Administrative Page” for your office.

A screenshot of the 'MMEA Vice Presidents' page. At the top is a blue header with the text 'MMEA Vice Presidents'. Below the header is a navigation bar with seven categories: 'Band VP', 'Choral VP', 'Early Childhood Elementary VP', 'General Music VP', 'Jazz VP', 'Orchestra VP', and 'College/University VP'. The 'Band VP' category is selected and expanded. It shows a photo of Jared Brockmeyer, his name, and his email address 'bandvp@mmea.net'. Below the email address is a link 'Band Vice President | Administrative Page' which is highlighted with a red box and a red arrow pointing to it from the right.

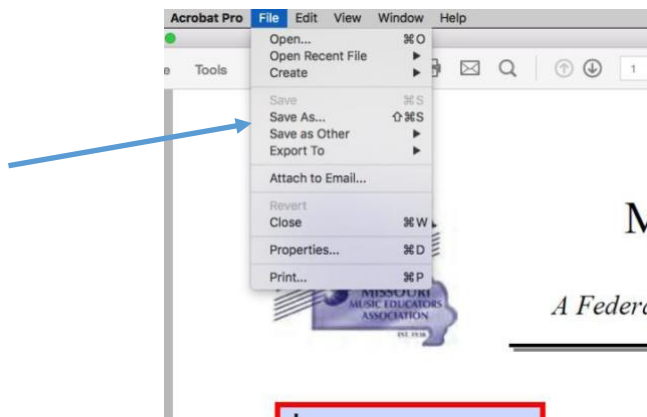
4. Scroll to the bottom of the page and select “Conference Administration.”



5. Download the appropriate *blank* Clinician Agreement document.



6. Save and rename the blank document directly to your computer.



7. Open the document from your computer

MMEA Missouri Music Educators Association  
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MMEA AREA MMEA CLINICIAN AGREEMENT

This is an agreement entered into between MMEA and:

NAME: \_\_\_\_\_ OFFICE PHONE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

To be completed by MMEA Vice-President

IN-STATE CLINICIAN (EDUCATOR)

IN-STATE CLINICIAN (NON-EDUCATOR)

OUT-OF-STATE CLINICIAN

The clinician named above agrees to render services at the assignment described below:

CLINIC DATE: Choose One TIME OF SESSION: \_\_\_\_\_ LENGTH OF SESSION: Choose One

CLINIC DATE: Choose One TIME OF SESSION: \_\_\_\_\_ LENGTH OF SESSION: Choose One

CLINIC DATE: Choose One TIME OF SESSION: \_\_\_\_\_ LENGTH OF SESSION: 90 Minutes

NOTE TO CLINICIANS/PRESENTERS: All financial transactions must be submitted through the MMEA website by MARCH 1, 2019 to receive reimbursement for fees and/or expenses.

MMEA Contract Agreement Instructions

8. Complete all relevant information pertaining to the terms of the agreement.

**\*SAVE THIS FILE ONCE COMPLETED.**

**\*DO NOT SIGN this copy.**

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MMEA AREA INDEPENDENT CONTRACTOR AGREEMENT  
OUT-OF-STATE CLINICIAN

All information to be completed by a MMEA Officer / Board Member

**CLINICIAN INFORMATION**  
This is an agreement entered into between the MMEA and:

NAME: \_\_\_\_\_ OFFICE PHONE: \_\_\_\_\_  
HOME ADDRESS: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
EMAIL: \_\_\_\_\_  
Tax ID # / Social Security Number: \_\_\_\_\_ (Only if appearance fee exceeds \$600)

**SESSION INFORMATION**  
The clinician named above agrees to render services at the assignment described below:

**SESSION 1**  
DATE OF APPEARANCE: Select One \_\_\_\_\_  
TIME OF SESSION: Select One \_\_\_\_\_  
LENGTH OF SESSION: Select One \_\_\_\_\_

**SESSION 2**  
DATE OF APPEARANCE: Select One \_\_\_\_\_  
TIME OF SESSION: Select One \_\_\_\_\_  
LENGTH OF SESSION: Select One \_\_\_\_\_

**SESSION 3**  
DATE OF APPEARANCE: Select One \_\_\_\_\_  
TIME OF SESSION: Select One \_\_\_\_\_  
LENGTH OF SESSION: Select One \_\_\_\_\_

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MMEA AREA MMEA CLINICIAN AGREEMENT  
SIGNATURE PAGE

Name of Clinician: \_\_\_\_\_

**Terms of Agreement:**  
MMEA agrees to pay the following expenses (pre-negotiated):  
\*See attached reimbursement information.

Fee \$ \_\_\_\_\_  Transportation  Room  Meals  
MMEA requires that a PDF of handouts to be presented in all clinic sessions be submitted electronically through the MMEA Website by **January 18**.

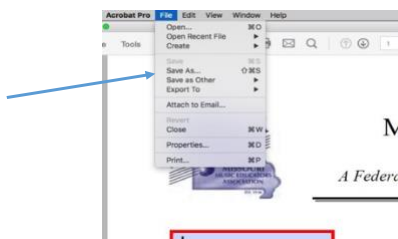
MY SPONSOR (Name): \_\_\_\_\_ agrees to pay for the following expenses related to my appearance (Check all that apply):  
 All Expenses  Fee  Transportation  Room  Meals

1. I have read, and I agree to the terms and conditions stated the MMEA Conference Clinicians Policies.  
2. I agree to the Terms of Agreement listed above.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_  
SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_  
SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

Submit Contract Electronically:  
<http://mmea.net/submit-document-qr.html>

9. Save the completed agreement to your computer



10. Select "Clinic Session Title Form" from the Conference Administrative Forms section.

Clinic/Session Administrative Forms

Clinic/Session Title Form	<b>Clinician Contract/Agreement Form</b>	Clinic/Session Information Form	2025 Conference Lodging Form	Session Handouts/Materials Form	Check Request/Reimbursement Form
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**2025 CLINICIAN CONTRACT/AGREEMENT FORM**

- Submitted by the MMEA Board Member that is responsible for the clinic/session.
- Includes uploading the appropriate Independent Contractor Agreement. (Completed -NO signatures)
- DEADLINE: SEPTEMBER 15**

Complete the following form for each 2025 conference clinic/session.

**SUBMIT | CLINICIAN CONTRACT/AGREEMENT FORM**

11. Complete all information on the online form.
12. Upload the completed agreement that was saved to your computer along with your clinic session title information.
13. Click “Submit” to submit the clinic information and contract agreement.

Upload File/s Here

Drop files here or

Select files

Max. file size: 456 MB, Max. files: 5.

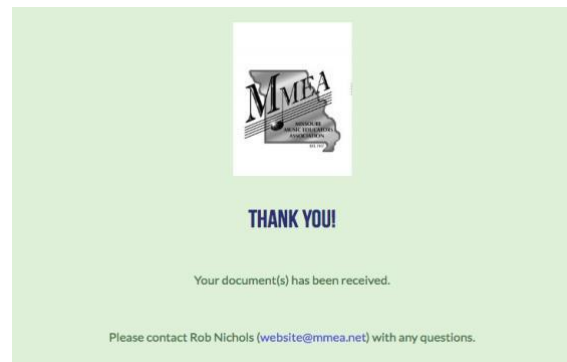
NOTE: Contracts/Agreements are considered "Pending" until the document reflects all required electronic signatures. The MMEA Executive Director will finalize the agreement and confirm the binding agreement (via email) to all relevant parties.

SUBMIT

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**Once submitted, you will receive a confirmation statement on the screen.**

***NOTE: You will also receive a confirmation email for this transaction.***



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**13. Paul Swofford will process the paperwork and send a copy of the completed agreement (via email) to be electronically signed by all parties.**

**14. Sign and submit the completed agreement through Adobe Sign.**  
\*Instructions will appear in the email that contains the completed agreement.