

EAST CENTRAL SCHOOL DISTRICT BAND PROGRAMS CONTACT FORM

***** PLEASE PRINT AND COMPLETE A FORM FOR EACH STUDENT *****

Contact information will be used for emergencies, time changes and other communications needed; will be used only for school or band booster purposes. It will not be shared with anyone outside of these groups. **Our primary form of communications is through email so please provide at least one valid email address.**

STUDENT CONTACT INFORMATION

Student's First Name: _____ Student's Last Name: _____

Student Email _____

Student's Phone: (_____) _____ - _____ Student's Grade: _____

Band (instrument) _____ Guard _____ Percussion _____

PARENT/GUARDIAN CONTACT INFORMATION

Mother's First Name: _____ Mother's Last Name: _____

Home Phone: _____ Cell Phone: _____

Email Addresses: _____

Father's First Name: _____ Father's Last Name: _____

Home Phone: _____ Cell Phone: _____

Email Addresses: _____

BAND BOOSTER MEMBERSHIP

Membership is good for one year beginning in June

Please check any/all areas in which you would be willing to assist.

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| <p>_____ Concessions</p> <p>_____ Chaperones</p> <p>_____ Uniform Committee</p> <p>_____ Membership Committee</p> <p>_____ Fundraising Committee</p> <p>_____ Communications Committee</p> | <p>_____ Marching Contests (hosted by East Central)</p> <p>_____ Ways and Means/ Spirit Committee</p> <p>_____ Game Day Dinner Committee</p> <p>_____ Equipment Trailer/ Pit Committee</p> <p>_____ Fiesta Parade Ticket Sales and/or Fiesta chair committee</p> |
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(For office use only) Paid Booster Member: \$