

# 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: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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.**

- |                                |  |
|--------------------------------|--|
| _____ Concessions              | _____ Marching Contests (hosted by East Central)               |
| _____ Chaperones               | _____ Ways and Means/ Spirit Committee                         |
| _____ Uniform Committee        | _____ Game Day Dinner Committee                                |
| _____ Membership Committee     | _____ Equipment Trailer/ Pit Committee                         |
| _____ Fundraising Committee    | _____ Fiesta Parade Ticket Sales and/or Fiesta chair committee |
| _____ Communications Committee |  |

(For office use only) Paid Booster Member: \$