

CONTACT INFORMATION	(please submit one form per memb	ier)	
Name	Guardian (if ur	ıder 18)	
Address		_City	Zip
Email Address		(most RCCB	communication is through email)
Phone (circle preferred contact num	per below):		
Mobile ()	Other ()		
Main Instrument	Other Instruments		
I DO NOT wish to have my co	ntact info available to others on th	e band roster.	
I DO NOT wish to have my na	me and photo online at <u>rosevilleba</u>	<u>ind.com</u> .	
 may increase by \$10 for all m Attend all rehearsals and comparticipate. Have my folder at every rehearsals 	rsday, October 3, 2019 (or 2 weeks tembership categories after Octobe teerts unless I inform my section lea arsal and concert, even if I am not vice to help with concert set-up/tea	after the date I joi er 3, 2019. ader and Music Dire there, and turn it ir ar down, or other o	ned if after this date). Dues ector that I will be unable to n at the end of the season.
Donations (optional):	ual \$45 Student □ General RCCB Donation: □ RCCB Scholarship Fund Donation: □ Band Federal Tax ID No. is 42-1628 Amount Paid \$ nclosed # (Make checks)	\$ n: \$ 3008. _ payable to <i>Rosevill</i>	e Community Concert Band.)
OFFICE USE ONLY PAIE	9 – date	Received by	

P.O. Box 23, Roseville, CA 95678 | rosevilleband.com | rosevilleband@gmail.com