

Student Name _____

Circle One: Wind Ensemble - Advanced Band - Beginning Band - Flags

RCMS BAND STUDENT INFORMATION

DIRECTIONS: Please fill out the following information sheet as neatly and completely as possible. If there is some information you do not know, please take it home and bring it back completed.

1. NAME: _____
(LAST) (FIRST) (BAND PERIOD)

2. PARENT/GUARDIAN NAME: _____

3. MAILING ADDRESS: _____
(Number and name of street or P.O. Box Number)

(Apartment, Space, or Lot number if any)

_____, California _____
(City) (Zip Code)

4. PARENT/GUARDIAN E-MAIL ADDRESS: _____

5. STUDENT E-MAIL ADDRESS: _____

6. HOME PHONE NUMBER: _____

7. PARENT/GUARDIAN CELL PHONE NUMBER(S): _____

8. PARENT/GUARDIAN WORK NUMBER(S):

Mother: _____ Father: _____ Guardian: _____

9. LANGUAGE(S) SPOKEN AT HOME: _____

10. TRANSPORTATION TO & FROM SCHOOL: (Check the one you use most often.)

_____ Bus _____ Car _____ Walk/Bike

**WHAT WOULD YOU LIKE TO SEE HAPPEN IN BAND THIS YEAR?
(PARENT AND STUDENT RESPONSE PLEASE)**

