

# Band / Orchestra Enrollment

Name	School	
Address	City	Zip
Home Phone	Work Phone(s)	

We are excited that your child is interested in participating in the Band / Orchestra program!  
Please take a moment to complete this card and have your son/daughter return it to their Director.

- We already have an instrument \_\_\_\_\_  

INSTRUMENT
MAKE
SERIAL NUMBER
- We desire to play \_\_\_\_\_  Need more information  

INSTRUMENT
- We will rent an instrument from a music store.
- We can not provide an instrument, but desire our child to participate. Please send an application home.

\_\_\_\_\_  
Parent / Guardian Signature

\_\_\_\_\_  
Date