TRABUCO HILLS HIGH SCHOOL INSTRUMENTAL MUSIC PROGRAM 2018-2019 STUDENT INFORMATION FORM

(please print clearly)

STUDENT'S INFORMATION							
First & Last Name:	Grade:	9	10	11	12		
Street Address:	Ensemble(s): (circle all that apply)	Band	Drumline	Guard	Orchestra	Jazz	
City, State, Zip Code:	Instrument(s):						
Home Phone Number:	Email Address:						
Cell Phone Number:	Add to the Message Board:			Yes / No			
Measurements (For uniform purposes; for all Marching Band members only):	Height ft	in.	We	ight:	lbs.		
MOTHER'S INFORMATION	FATHER'S INFORMATION						
First & Last Name:	First & Last Name:						
Work Phone Number:	Work Phone Numb	er:					
Cell Phone Number:	Cell Phone Number:						
Email Address:	Email Address:						
Subscribe to the Message Board: Yes / No	Subscribe to the Mea	ssage Boa	rd:	Yes / N	O		