

TRABUCO HILLS HIGH SCHOOL INSTRUMENTAL MUSIC PROGRAM
2019-2020 STUDENT INFORMATION FORM

(please print clearly)

STUDENT'S INFORMATION

First & Last Name: _____

Grade: 9 10 11 12

Street Address: _____

Ensemble(s): Band Drumline Guard Orchestra Jazz
(circle all that apply)

City, State, Zip Code: _____

Instrument(s): _____
(list all that apply)

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. Weight: _____ lbs.

MOTHER'S INFORMATION

First & Last Name: _____

Work Phone Number: _____

Cell Phone Number: _____

Email Address: _____

Subscribe to the Message Board: Yes / No

FATHER'S INFORMATION

First & Last Name: _____

Work Phone Number: _____

Cell Phone Number: _____

Email Address: _____

Subscribe to the Message Board: Yes / No