TRABUCO HILLS HIGH SCHOOL INSTRUMENTAL MUSIC PROGRAM
2020-2021 STUDENT INFORMATION FORM

(please print clearly)

https://bit.ly/THHS-SiF20-21 (Online Version)

STUDENT'S INFORMATION

First & Last Name: _____

Street Address: _____

City, State, Zip Code: _____

Home Phone Number: _____

Cell Phone Number: _____

Grade: 9 10 11 12

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

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

Email Address: _____

Measurements *(For uniform purposes; for all Marching Unit members only):*

Height _____ ft. _____ in. Weight: _____ lbs.

MOTHER'S INFORMATION

First & Last Name: _____

Work Phone Number: _____

Cell Phone Number: _____

Email Address: _____

FATHER'S INFORMATION

First & Last Name: _____

Work Phone Number: _____

Cell Phone Number: _____

Email Address: _____

** Complete the online version or send the completed form to thhsmusicprogram@gmail.com or drop-off in the booster mailbox outside of the director's office*