

Bartlett Community Concert Band Registration Form

PLEASE PRINT LEGIBLY

* Registration Date

* Required Information

_____, 2019

*Instrument(s) *Primary _____ *Other(s) _____

*Full Name: _____ D.O.B.: ___/___/___

*Home Address: _____

*City: _____ *State: _____ *Zip: _____

*Occupation/Profession: _____

*E-mail Address: _____

Very Important! Most info is sent via E-Mail! PLEASE PRINT CLEARLY!!

*Phone Numbers:

*Home: _____ *Cell Phone: _____

Work: _____ Other Phone: _____

*Number of years you have played in the Bartlett Community Concert Band _____

*BCCB Shirt: **\$35.00** Size: XS S M L XL XXL Other _____ BCCB Hat: **\$10.00**

BAND DUES: **\$40.00 if Join Before 7/16/18** **\$25.00 if Join 7/16-10/31/18** **After 10/31/18 - \$0.00**

Date Dues Paid _____, 2018

(Optional) Musical Background: _____

(Optional) Do you play in any other band(s) or musical group(s)? Yes No
If Yes, Name(s): _____

(Optional) Spouse Name: _____ Anniversary: ___/___/___

(Optional) Children/Other Family Members in Household: _____

(Optional) Business Name/Employer: _____

(Optional) Address: _____

Signature: _____ **Date:** _____, 2019