

Band and Pageantry Parent Information

Child's Name: _____ Phone: _____

Grade: _____ Instrument: _____

Address: _____ City/Zip: _____

Your Name: _____ Occupation: _____

Daytime Phone: _____ e-mail: _____

Spouse's Name: _____ Occupation: _____

Daytime Phone: _____ e-mail: _____

Do you have any special skills or interests that may be helpful to the students (musical skills/experience, clerical skills, carpentry, cooking, welding, sewing, truck-driving, corporate fundraising, anything) ?

Do you have an employer who would be willing to sponsor our group or make donations?

Would you be available to volunteer beyond bingo? What times/days are the best?
