

2011 / 2012 FRANKLIN CENTRAL HIGH SCHOOL BAND
STUDENT INFORMATION FORM
PARENTS – PLEASE FILL OUT COMPLETELY AND RETURN TO BAND OFFICE

NAME _____ INSTRUMENT _____
BIRTHDATE _____ T-SHIRT SIZE _____
STREET _____ ZIP _____
HOME PHONE _____ STUDENT CELL PHONE _____
EMAIL _____ GRADE _____
ARE YOU IN A FALL SPORT? _____ NAME OF SPORT _____

PARENTS NAME _____
MOM'S CELL PHONE _____ MOM'S EMAIL _____
DAD'S CELL PHONE _____ DAD'S EMAIL _____

Please designate which email to use for sending Student Account Statements by circling the email address!

WILL YOU MISS ANY REHEARSALS DURING THE SUMMER? _____
IF YES, DATES PLEASE _____
REASON (CHURCH CAMP, SENIOR PICTURE, ETC...) _____

TO BE FILLED OUT BY PARENTS:

DO YOU HAVE ANY SPECIAL SKILLS THAT WOULD BE HELPFUL TO THE SUCCESS OF THE FRANKLIN CENTRAL MUSIC PROGRAM AND/OR WOULD YOU BE WILLING TO DONATE YOUR TIME IN SOME OF THE FOLLOWING AREAS?

(CIRCLE: SEWING, COOKING, WELDING, CARPENTRY, ELECTRICIAN WORK, PAINTING, CHAPERONING TRIPS, PROP CREW, TRUCK DRIVER, UNIFORM CLEANING, ETC)

OTHER: _____