

SHS Band/Orchestra Booster Club Membership Form

Parent Name(s) _____

Mailing Address: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____

Email Address: _____

Circle Organization:

Student Name(s): _____ Band Orch
_____ Band Orch
_____ Band Orch

Type of Membership: Ind (\$10) or Family (\$15) (Circle One)

Date Paid: _____ Payment Method: Cash / Check / Band Account