

Baler Band Boosters Membership Application Form



Membership in this organization is \$5.00 per person. This gives you voting rights for group decision making, and access to better communications about band activities and meetings. Please fill the form out completely, and please print clearly.

Name(s): _____

Mailing Address: _____

Phone Number: _____ Cell Phone: _____

Email Address: _____



Student's Name: _____ Graduation Year: _____

Student's Email: _____

Student's Unit (Band, Colorguard, etc.): _____

Parent involvement is crucial to the success of the program. We are always in need of volunteers, even if we forget to ask! Please indicate below in which areas you can be of help.

Committees:

Fundraising _____

Hospitality _____

Communications _____

Uniforms _____

Publicity _____

Historical _____

Inventory _____

Events:

Fireworks _____

VFW _____

Football Games _____

Fall Band Reviews _____

Parades _____

Spring Band Reviews _____

San Benito Band Festival _____

Are you able to pull the Band Equipment Trailer? ____Yes ____ No

Please bring \$5.00 per person and this completed form to the Band Booster meeting or mail it to:

Baler Band Boosters
P.O. Box 373
Hollister, CA 95024

Amount Paid: _____

Received by: _____

Date: _____