"Building Futures through Music"

MEMBERSHIP FORM $35

PRINT ALL INFORMATION CLEARLY

Student's Name:_____
LAST FIRST MI

Mother's Name:_____
LAST FIRST

Father's Name:_____
LAST FIRST

Address:_____

City:_____State:_____ Zip Code: _____

Home Phone: _____ Work Phone:_____

Cell Phone:_____ Email Address: _____

Additional Email addresses: _____

Additional Family Members: _____

Are you able to volunteer: Yes: ____ No: _____ Week day: Evening Afternoon
Weekend: Evening Afternoon

Signature:_____Date:_____

Circle Payment Type: CASH CHECK CREDIT CARD: #_____
VISA MASTERCARD DISCOVER EXP. _____

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For Use by Buena Bands Association Only
( ) Cash ( ) Check ( ) Credit Card

Amount Paid:_____ Check Number:_____ Assn. Member_____