



Registration
SEASON 9 - 2015-2016
***** PLEASE PRINT *****

Date _____

Name _____
(as you wish it to appear in publications)

Mailing Address Street _____

City/State _____ *Zip* _____

Tel.# _____ **Cell#** _____

E Mail _____

Primary Instrument _____
(Euphonium: Treble Clef or Bass Clef?)

Do you own your instrument? Yes or No

Secondary Instrument(s)? _____

Profession _____
(if retired, please list your former profession, and add "- retired")

Please return completed form to:

Jane Milbrodt, Secretary
Bowling Green Area Community Bands
405 Madison Court
Bowling Green, OH 43402
jane.milbrodt@gmail.com

***** see over *****

(continued)