



## Senior Band Night RSVP Card

Senior's Name: \_\_\_\_\_

Sibling band student (s) name(s) \_\_\_\_\_  
(only if a band student)

\_\_\_\_\_

Will you attend the reception? (please circle one) YES NO

Total number attending reception: \_\_\_\_\_

Senior Flower: (please circle one) Corsage or Boutonniere

Mother / Stepmother Flower: How many needed? \_\_\_\_\_

Total number of vegetarian entrees: \_\_\_\_\_

Please note any food allergies: \_\_\_\_\_

**Please have your student return this form to the WHITE BAND BOX attention:  
Helen Kelly by OCTOBER 9, 2015.**