Date: _____ Membership Form

Gilbert High School Band

	Studer	nt Personal Info	ormation			
Student ID:	(ne	(needed for CutTime)		Graduating Class of		
Full Name:						
Las		First		M.I.		
Family Last Nar	ne:		(Only if land an	 me is different than parents,		
Home Address:	·		, , ,	, ,		
City		State	Zip			
Home Phone:						
Student Cell Phone:		Carrier:				
Student Email:						
Grade in the fa						
Gender:	Male	ale Birth Date:		Age:		
Junior High Att	ended:					
Do you have a	sibling in Gilbert Band		□ No			
If yes, who? Na	me:					
		Band Informati	on			
Is this your first	t year in Gilbert Band	I?	□ No			
Is this your first	t year in Color Guard	? 🗌 Fall	☐ Winter			
Instrument(s):						
Marching:			Concert:			
Percussion:						
(Ty	pically students in Dr	umline will be assig	ned to a specific ins	strument)		

		Family In	nformation			
Student live	s with:	☐ Both Parents	One Parent	Legal Guardian		
Home Address: _						
City		State		Zip		
		Mother's	Information			
Custodial Parent?		Yes 🗌 No				
Mother's Name:						
	Last		First		M.I.	
Home Address: _	,,,, ,,,,,					
	(If aiffe	rent from above)				
City		State		Zip		
Home Phone: _			Work Phone:			
Cell Phone:			Best phone to call:			
Mother's email:						
Title:	Occupation:					
		Father's I	nformation			
Custodial Parent?)	Yes 🗌 No				
Father's Name:						
	Last		First		M.I.	
Home Address: _						
	(If diffe	rent from above)				
City		State		Zip		
Home Phone: _			Work Phone:			
Cell Phone:			Best phone to	call:		
Father's email:						
Title:		0	ccupation:			