

Park Hill District Marching Band Festival

Registration Form and Invoice

Please return (e-mail, fax or postal mail) to Justin Doss by June 1st, 2012.

Your registration will be considered confirmed upon receipt of this registration form AND registration fee.

School Name: _____

Band Name: _____

School Address: _____

Director/Staff Name(s): _____

Head Director's School Phone #: _____ Cell Phone #: _____

Head Director's E-Mail: _____ School Fax #: _____

Band Classification – Based on total school enrollment for **grades 10-12 only**. (You may elect to participate in a larger class if you wish – simply indicate if you would like to do so). There will be 2 or 3 total classes.

Grade 10-12 school enrollment: _____ Would you like to compete 1 class higher (if applicable)? _____
If yes, for which event(s)? _____

Please put an "X" in the appropriate box(es).

Parade Portion	Competitive	<input type="checkbox"/>	Comments Only	<input type="checkbox"/>	Not Participating	<input type="checkbox"/>
Field Portion	Competitive	<input type="checkbox"/>	Comments Only	<input type="checkbox"/>	Not Participating	<input type="checkbox"/>
Indoor Portion (Competitive only)	Drumline	<input type="checkbox"/>	Color Guard	<input type="checkbox"/>	Not Participating	<input type="checkbox"/>

Fees – Please make checks payable to "Park Hill Band Backers"

Please put an "X" in the appropriate box(es).

Parade (\$50) ☐ Field (\$200) ☐ Drumline (\$100) ☐ Color Guard (\$100) ☐

****Subtract \$25 for field + 1 indoor event; subtract \$50 for field + 2 indoor events** TOTAL: \$ _____

MAIL CHECKS (due by Aug. 1) TO:

Park Hill High School
Attn.: Justin Doss
7701 NW Barry Road
Kansas City, MO 64153

OTHER CONTACT INFORMATION:

E-mail: dossju@parkhill.k12.mo.us
Phone: 816-359-6319
Fax: 816-359-4119