



Band Application 2011-2012 (New Students)

This application needs to be completed and turned in to Mr. Beckstrom.

Student's Name _____ Grade _____

Parent/Guardian's Name _____

Street Address _____

City _____ State _____ Zip _____

Parent/Guardian's Email Address _____

Homeroom Teacher _____

What instrument are you interested in playing?
(Number your top three choices)

Flute Clarinet Alt Saxophone
 Tenor Saxophone Trumpet French Horn
 Baritone Trombone Tuba Percussion

Have you ever played an instrument before? Yes No
What instrument? _____

Do you currently own an instrument? Yes No
If yes, what type of instrument? _____

Band practice will be on Tuesdays (and possibly Thursdays) after school from 2:05 to 4:00. Students will have to provide their own transportation home. The start date for band practice will be announced after Mr. Beckstrom has processed the applications.

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____