



**Cabell Midland Marching Knights
Band Member Information Form
2014-2015**

Please Print

Last Name _____ First Name _____

Grade (9-12) _____ Parent's E-Mail Address _____

Address _____
Street City State Zip

Mailing (If Different)
Address _____
Street City State Zip

Parents' Names _____

Phone Number(s): Home: () Cell: () Work: ()

Marching Instrument: _____

Please Check One: Student Owned _____ OR School Owned _____

Make & Model of Instrument _____

Serial Number of Instrument _____

T-Shirt Size (**Circle One**) Adult Sizes : Small Medium Large XL XXL XXXL

Pant Size: Waist _____ Length _____