

Livingston High School Band Boosters – Sign-in Sheet

Please PRINT clearly!!

	Student 1	Student 2
Name	_____	_____
Grade	_____	_____
Email	_____	_____
Mobile Phone	_____	_____
Instrument	_____	_____
Band (Concert, Marching Jazz)	_____	_____
	Parent/Guardian 1	Parent/Guardian 2
Name	_____	_____
Email	_____	_____
Mobile Phone	_____	_____
Home Phone	_____	_____
Address	_____	_____

I would like to help with (check all that apply)

- _____ Band camp (pizza distribution, parent preview night setup etc.)
- _____ Snack distribution at home football games (don't need to attend all)
- _____ Pit crew at games and competitions (don't need to attend all)
- _____ Marching Band - End of Season Dinner
- _____ Refreshments for Concert Band performances (Winter and/or Spring)
- _____ Jazz Band dinner dance (March)
- _____ Jazz Band Festival (April)
- _____ Fundraising
- _____ Membership
- _____ I am not sure yet, but please email me as you need volunteers