



COLORADO MASONIC HIGH SCHOOL BAND CAMP
JUNE 30 – JULY 4, 2017



Mail to: Colorado Masonic High School Band Camp, Grand Lodge Office, 1130 Panorama Drive, Colorado Springs, CO 80904, email: scoutaury@coloradofreemasons.org

Our Organization will participate and we are submitting the following:

We would like to make a donation/sponsor _____ student(s). The cost is \$325.00 per student.

Enclosed is our donation of _____.

*Please make check payable to: Colorado Masonic Band Camp. Date: _____

PRINT CLEARLY OR TYPE

NAME & # OF SPONSORING LODGE OR MASONIC AFFILIATED BODY:

Organization Name _____ No. _____

Address _____

City _____, CO, (Zip) _____ - _____

Name _____ Title _____
(Brother or Sister submitting this form)

Address _____ P. O. Box mail address _____

City _____, CO, (Zip) _____ - _____ Phone () _____

If you have contacted a Band Director and have a student please put the information here. If you do not have a student the Band Camp will glad to provide one. Band Camp provide a student _____

Name of Student _____
(Please spell and print correctly, as it will appear on Name Badge and Program)

Address _____ P. O. Box mail address _____

City _____, CO, (Zip) _____ - _____

Guardian/Parent's Name: _____

Guardian/Parent's Phone: () _____

Guardian/Parent's Cell Phone: () _____

Guardian/Parent's Email: _____

Name of High School _____

Band Director's Signature: _____ Phone No.: _____

Please Print Band Directors Name _____

Marching Band Instrument _____

CIRCLE: Male Female CIRCLE: 9th grade 10th grade 11th grade

List any special music honors received and chair in HS Band. Information in this section is important. Please give all facts and details
 Space for comments is on the back of this sheet.
 This Registration Form may be duplicated for additional Student Registrations.