



Seminole High School Band

The Pride of the Tribe

2017-2018 Registration Student/Family Information

Student Name: _____ Grade: _____ Grad Year: _____

Returning Student: _____ **New Student:** _____

Student Cell #: _____

Student Date of Birth: _____

Student EMAIL: _____

Parent/Guardian 1 (Primary Contact) Information

Name: _____

Address: _____

EMAIL: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____

Parent/Guardian 2 Information

Name: _____

Address: _____

EMAIL: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____

