

**SPMS INSTRUMENTAL MUSIC BOOSTERS
MEMBERSHIP 2009 – 2010**

STUDENT'S NAME: _____

Instrument: _____ Brand: _____ Serial# _____

Music Class(es) (Circle ALL that Apply): Day: A B C Period: _____

BAND: *ADVANCED* *INTERMEDIATE* *BEGINNING* *STAGE*

ORCHESTRA: *ADVANCED* *INTERMEDIATE* *BEGINNING*

PLEASE PRINT CLEARLY!!!

Parent Name(s): _____

Address _____

City _____ Zip Code _____

Home Phone# _____ Cell Phone # _____

Parent's Email: _____

All communications, such as reminders and schedule changes, will be via EMAIL.

LEVEL: ___ BASIC (\$15) ___ TRUE BLUE (\$40) ___ STERLING SLIVER (\$75)

Please make checks payable to: **SPMS MUSIC BOOSTERS**

Membership fees pay for new instruments, teacher needs & critical program needs.

Do you want to be included in the Member Directory? YES NO

My child has permission to be photographed or videotaped in school related projects.

Circle: YES / NO Parent Signature _____

For SPMS Music Boosters to function we need your support and volunteer hours. Circle the activities you would like to help with or check here for **AS NEEDED** _____.

UNIFORMS: ___ BAND (jackets/shirts) / ___ ORCHESTRA (Girls & Boys) & Sweatshirts

CONCERTS: ___ Chaperone ___ Programs

FUNDRAISERS: ___ Innisbrook ___ Cookie Dough ___ Pizza ___ Carwash

ADMIN: ___ Newsletter, Membership Directory

SOCIALS: ___ Fall Social ___ Chaperones ___ Bakers ___ Spring Pool Party

THANK YOU FOR VOLUNTEERING!!!

Do not write in this section:

Paid by: _____ Cash _____ Check (Check # _____)