

**2009-2010
HOLLY SPRING HIGH SCHOOL
BAND INFORMATION FORM**

Contact info: Michael E. Biasi, Director of Bands (mbiasi@wcpss.net/577-1766)
5329 Cass Holt Road Holly Springs, NC 27540

****Please return ASAP to your band director or mail to director****

Name: _____
Address: _____
Zip Code: _____
Phone Number: _____
Cell Phone Number (optional) _____
Email Address: _____

Parents: _____ Email Address: _____
Work Phone (Dad): _____
Cell Phone (Dad/optional): _____
Work Phone (Mom): _____
Cell Phone (Mom/optional): _____

Emergency Contact: _____
Emergency Phone: _____

Grade in School Next Year: _____
Instrument: _____
Secondary Instruments: _____

Middle/High School Currently Attending: _____
High School Attending Next Year: _____

Are you planning on taking band next year? Y___ N___
Are you planning on being in the Golden Hawks Regiment (Marching Band)? Y___ N___
If yes, Marching Instrument? _____
Colorguard? Y___ N___
Percussion? Y___ N___

Are you interested in Jazz Band? Y___ N___

Classes you plan on taking in 2009-2010 (Remember band is a double-block year round course)

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

Anything special that you would like to share about your intentions next year, classes, etc.?