

## **2017 Fall Marching Band REGISTRATION FORM**

www.greateastmusicfestivals.org Phone 617-268-4600 x107 Fax 617-687-2551 swade@InspireArts.org

Pick a Date for SIX FLAGS: ☐ Saturday 10/21 (Park open until 11pm)						
□ <b>Sunday 10/22</b> (Park open until 9pm)						
School			Director(s)			
Address			City		St	Zip
School Phone			Cell Phone			
E-mail for ALL DIRECTORS						
GROUP INFORMATION						
# of Students	# of Adults	Tot	al tickets needed	**Tickets are** \$40 each		are**
List approximately how many members you have in each of the following sections:						
Brass Woodwinds Battery Front Ensemble/Pit						
Color Guard – Flags/Dance Color Guard – Sabre/Rifle Other						
**When giving #s, please be as accurate as possible. It is easier to add more later than to decrease* *						
REGISTRATION FEE IS \$60 PER GROUP (NON-REFUNDABLE)						
Credit Card #		Exp Date	Security Code			
Zip Code	Purchase Order	icable)		Checl	Check Included $\square$	
<ul> <li>A registration fee of \$60 per group must be included when returning this form. This fee is not considered a deposit or credit on your account; the per person fee is in addition to the registration fee.</li> <li>Groups will be sent a separate invoice for festival and park fees.</li> <li>You are financially responsible for all participants that appear on your statement.</li> <li>You may NOT decrease numbers after October 6th 2017.</li> <li>I understand that the signed application is considered a contract between the director/school and Great East Music Festivals. I agree to meet all deadlines and financial obligations.</li> </ul>						
Director	Date					