

# Vermilion High School Band

## Student Information Sheet

Please return by May 19, 2026

Fill in all applicable spaces (even student cell phone #'s):

Name \_\_\_\_\_ Parent's email \_\_\_\_\_

DOB \_\_\_\_\_ Parent's email 2 \_\_\_\_\_

Year you will graduate \_\_\_\_\_ Student's email \_\_\_\_\_

MB Instrument \_\_\_\_\_ CB Instrument \_\_\_\_\_ Home phone # \_\_\_\_\_

Parents' full names \_\_\_\_\_ Student cell # \_\_\_\_\_

\_\_\_\_\_ Dad cell # \_\_\_\_\_

Address \_\_\_\_\_ Mom cell # \_\_\_\_\_

City \_\_\_\_\_ ZIP \_\_\_\_\_ Dad work # \_\_\_\_\_

T-shirt size (S, M, L, XL, XXL) \_\_\_\_\_ Mom work # \_\_\_\_\_

Other activities you are involved with:

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PLEASE LIST ANY KNOWN ALLERGIES YOUR CHILD HAS

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