

CARLYNTON GOLDEN COUGAR MARCHING BAND

2024-2025 CONTACT LIST

Student's Name: (Last) _____ (First) _____

Nickname/Preferred: _____ Instrument / Section: _____

Street Address and Zip Code: _____

Parent / Guardian Name: _____ Phone #: () _____

Parent / Guardian Email Address: _____

Parent/ Guardian Home Address if different from Student:

Parent / Guardian Name: _____ Phone #: () _____

Parent / Guardian Email Address: _____

Parent/ Guardian Home Address if different from Student:

Are you ok w/ communication via text? YES NO Best #: () _____

A working phone and email for a minimum of one parent/guardian per student is required!

This list is used primarily by "Executive Committee / Board Members of the Association", but in the past has been shared with all band families. **Please sign below and indicate if you do or do not permit us to share this information with all band families.**

I DO/DO NOT give my permission for my student's information to be shared with all band families:

Signature / Date: _____

The Band Parents Association explicitly prohibits the use of the band contact list for solicitations of any type.