

Annual 2010-2011 Association Membership

To join the LHS Bandparents Association or renew for this year:

1. Complete the form below
2. Make your check payable to the LHS Bandparents Association
3. Mail the check and form to: Roger and Teresa Wood, Membership Chairs
2117 E Tamarac Dr
Sioux Falls, SD 57103

PLEASE PRINT

Parent Name

Telephone

Mailing address

City

State

Zip

Student Name

Grade

Student Name

Grade

_____ \$20.00 membership.

_____ I wish to make an additional contribution in the amount of \$_____ to the LHS Bandparents Association, Inc.

Make checks payable to the LHS Bandparents Association.

Thank you for your support!