

William Tennent Marching Band
Photo Release Form
MANDATORY

The William Tennent Marching Band Association (WTMBA) is including photos of students, teachers and school activities on the website, the district cable channel and in print media.

We/I hereby give permission for the WTMBA to use photos of the student named below on the WTMBA website, the district cable channel or other electronic media or print forms of communication.

Student(s) Name _____

Parent or Guardian Signature _____ Date _____

William Tennent Marching Band
Association
Family Membership
(not mandatory)

We invite all Marching Band Parents & Guardians to become members of the "WTMBA". Membership financially supports the organization.

Show your spirit and support the marching band by joining the "WTMBA"!

Dues are only \$5 per family.

PLEASE JOIN!!

Membership dues may be paid at any Association Meeting, the Band Picnic, any other Marching Band function, or you can mail it to Tami Sharp.

Please make all checks payable to "WTMBA"

SIGN ME UP!!

Yes! I want to support the Marching Band by becoming a member of the "WTMBA" for the 2016-2017 school year.

Band Member Name(s): _____

Family Name: _____

I have enclosed a check in the amount of \$5.00 payable to "WTMBA" for each family membership.

Return to: Tami Sharp, WTMBA Corresponding Secretary, 18 Garrison Road, Ivyland, PA 18974

For WTMBA Use Only:

Amount Pd \$ _____ Date Pd _____ Cash _____ Check # _____ Initials _____

WTMBA PARENT COMMUNICATIONS

We want to be able to communicate with you!!
Meetings, Updates to the Schedule, Last Minute Changes, Reminders, Fundraising Info, Arrival
Times, Departure Times, Carpool Info, Band News
These are some of the things we would like to be able to share with you!

Please complete the following information:

Band Member Name(s) _____
Parent/Guardian Name(s) _____
Address _____

Home Telephone # _____
Cell Phone #1 (Optional) _____
E-mail Address #1 _____
Cell Phone #2 (Optional) _____
E-mail Address #2 _____

May we publish this information for other band parents? Yes _____ No _____

Would a parent or/guardian at another address also like to receive WTMBA Communications, or do you want e-mails sent to additional e-mail address? Please complete items that apply:

Parent/Guardian Name(s) _____
Address _____

Home Telephone # _____
Cell Phone # (Optional) _____
E-mail Address(es) _____

May we publish this information for other band parents? Yes _____ No _____

Please return this form including communications, photo release and membership ASAP to:
Tami Sharp
WTMBA Corresponding Secretary
18 Garrison Road
Ivyland, PA 18974
215.416.9185

(See Other Side for Photo Release and Membership)