

**GROVE CITY HIGH SCHOOL BAND BOOSTERS 2021-2022  
MEMBERSHIP APPLICATION**

**ANNUAL DUES \$5.00 PER PERSON**

**APPLICANT(S)** \_\_\_\_\_

LAST NAME FIRST NAME SPOUSE

**STUDENT(S)** \_\_\_\_\_

FIRST NAME LAST (IF DIFFERENT) Graduation year Instrument

**STUDENT(S)** \_\_\_\_\_

FIRST NAME LAST (IF DIFFERENT) Graduation year Instrument

**ADDRESS** \_\_\_\_\_

**HOME PHONE** \_\_\_\_\_

**CELL PHONE** \_\_\_\_\_

**WORK PHONE** \_\_\_\_\_

**E-MAIL ADDRESS(ES)** \_\_\_\_\_

**OCCUPATION** \_\_\_\_\_

**SPOUSE'S OCCUPATION** \_\_\_\_\_

Please list any special interests, skills, etc that you or your spouse may have \_\_\_\_\_

Please check which of the following membership categories applies to you and your spouse:

Self  Spouse  Active Member: Parents, guardians, or other individuals providing mandatory financial sponsorship of students actively enrolled in the Program. Families are limited to 2 Active Members. Each Active Member shall have one vote.

Self  Spouse  Associate Member: Those individuals who are not eligible for Active status above and who have been approved by the Board. Associate members may not vote or serve on the Executive Board.

Are you available during the day? \_\_\_\_\_yes \_\_\_\_\_no

Do you have any medical training? \_\_\_RN \_\_\_LPN \_\_\_EMT-P \_\_\_EMT-A \_\_\_\_\_other (Please explain)

Do you have any special driver's licenses? CDL\_\_\_\_\_ Other\_\_\_\_\_

Are you a notary? \_\_\_\_\_yes \_\_\_\_\_no

**BOOSTER OPPORTUNITIES:** In which of the following areas are you willing to help?

_____ Chaperone	_____ Fundraisers	_____ Membership	_____ Special events
_____ Color Guard/Flag Corps	_____ Levy Concessions	_____ Mentoring	_____ Street Concerts
_____ Committee chair/co-chair	_____ Historian	_____ Parades	_____ Transportation
_____ Concerts	_____ Hospitality	_____ Pictures	_____ Uniforms
_____ Concessions	_____ Invitational	_____ Publicity	_____ Videotaping
_____ Directory		_____ Sewing/Mending	_____ Water
_____ Equipment maintenance	_____ Medical	_____ of Uniform/Flags	_____ Web site

**FALL AND SPRING BAZAARS:**

_____ Admissions	_____ Food carts	_____ Raffle	_____ Anywhere needed
_____ Auxiliary kitchen	_____ Kitchen	_____ Security	
_____ Bake sale	_____ Parking	_____ Set up/tear down	_____ Chair/Co-Chair - any of the above if needed
_____ Cookie contest (fall only)	_____ Popcorn	_____ Signs	

**RELEASE OF LIABILITY**

I hereby release, discharge and waive any and all rights of action, in law or in equity, for claims or damages arising from any cause whatsoever resulting from my working on behalf of the Grove City High School Band Boosters, Inc., as a volunteer worker, chaperone or in any other capacity, which I might have against Grove City Band Boosters, Inc., and/or the South-Western City School District.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Cash _____
Ck# _____
Amt _____