

HONORS BAND VERIFICATION



Last Name: _____ First Name: _____

Class: _____ Instrument: _____

Ensemble Participation:

Ensemble	Signature of Director	Contact Info for Director

Individual Performance:

Ensemble	Signature of Director	Contact Info for Director

Service:

Activity	Signature of Sponsor	Contact Info for Sponsor

Leadership:

Activity	Signature of Sponsor	Contact Info for Sponsor