# Ardrey Kell HS "Mighty Knight Band"

## Invitational Application

(Please submit by October 9, 2009)

School: _____

Name of Band: _____

Director(s): _____

School Address: _____

City, State, Zip: _____

**Best time to be reached:**

Office Time: _____ Phone: _____

Home Time: _____ Phone: _____

Email: _____

**Classification**

Please list exact number of winds: _____

Total size of Marching Band: _____

Please list class you are entering: _____

( ____ We elect to compete in a higher class)

**Please sign below:**

_____

**Principal** **Date**

_____

**Band Director** **Date**