

NORWALK HIGH SCHOOL MARCHING BAND
EMERGENCY CONTACT AND INFORMATION SHEET
Please return completed form ASAP at one of the first practices

STUDENT INFORMATION

NAME: _____

ADDRESS: _____

HOME PHONE: _____

CELL PHONE: _____

EMAIL:* _____

INSTRUMENT: _____

GRADE: _____ T-SHIRT SIZE (adult sizes): _____

PARENT/GUARDIAN INFORMATION

PARENT/GUARDIAN 1 NAME: _____

ADDRESS: _____

HOME PHONE: _____

CELL PHONE: _____

WORK PHONE: _____

EMAIL:* _____

***PLEASE SEND ALL PARENT/GUARDIAN #1 EMAILS IN SPANISH** _____ **YES** _____ **NO**

OCCUPATION: _____

PARENT/GUARDIAN 2 NAME: _____

ADDRESS: _____

HOME PHONE: _____

CELL PHONE: _____

WORK PHONE: _____

EMAIL:* _____

***PLEASE SEND ALL PARENT/GUARDIAN #2 EMAILS IN SPANISH** _____ **YES** _____ **NO**

OCCUPATION: _____

EMERGENCY CONTACT If parent/guardian listed above can't be contacted

NAME: _____

RELATIONSHIP: _____

HOME PHONE: _____

CELL PHONE: _____

* It is VERY important to list at least one email address per family, as this is the main method of communicating rehearsal and performance schedules/updates. Thank you!