

**SOUTH OLDHAM HIGH SCHOOL DRAGON CLASSIC
SATURDAY, OCTOBER 10, 2009
APPLICATION FORM**

School Name: _____

Band Name: _____

Address: _____

Band Director: _____

Band Director E-mail: _____

School Phone: _____ Director's Home Phone: _____

Director's Cell Phone: _____ School Fax #: _____

Assistant Director (if applicable): _____

Additional Staff Members: _____

Drum Major(s): _____

Total Playing Members: _____ Guard Members: _____ Total Members: _____

Class (Circle): A AA AAA AAAA AAAAA

Please Circle One: Festival Competitive

Repertoire: _____

Number of Buses: _____ Number of Equipment Vehicles: _____

Type(s) of Equipment Vehicles: _____

Return to:
Ryan McAllister, South Oldham High School
5901 Veterans Memorial Parkway
Crestwood, KY 40014
e-mail: ryan.mcallister@oldham.kyschools.us
fax: (502) 241-0955

APPLICATION DEADLINE: Monday, September 28, 7:00 p.m.