

Jamboree Band Registration

IMPORTANT - Please Print
Complete and Return as soon as possible.

(Name of Band and Temple)

We will attend the Fantasy We will NOT attend the Fantasy
There will be approximately _____ performing members.

Send to:
Darren A. DeHass
2997 Daystar Drive
Billings, MT 59102-6826

Signature _____

Title _____

Address _____

City _____ State _____ Zip _____

Band Information

Please Print

This is Preliminary Information Only

Name of Band and Temple _____

City/State _____

Member of Regional Associations _____

Year Organized _____ Number of Members _____ Number Performing _____

Officers: President _____

Vice President(s) _____

Secretary _____

Treasurer _____

Director _____

Current Shrine Honors _____

Past Shrine Honors _____

Additional Remarks _____

Submitted By: _____

Date: _____ Title: _____