

2017 WYOMING STATE MARCHING BAND FESTIVAL

Casper Events Center

OCTOBER 14, 2017

PHONE 577-0614 FAX 577-0637

ENTRY FORM

ENTRY FORM DEADLINE DATE: Postmarked no later than September 22, 2017.

Name of School: _____

Name of Director: _____

Other Band Staff Members or assistant directors: _____

Total Number of Marching Band Members: _____

Do you wish to make use of the rehearsal time? Yes____ No____

PLEASE PRINT TWO COPIES OF THIS ENTRY FORM AND RETURN TO THE FOLLOWING:

Please include a check/voucher for registration at \$100 per marching band and send to:

Wyoming High School Activities Association
6571 East 2nd Street
Casper, WY 82609

Please mail or email the other copy of this entry form to:

Karia Schofield
Twin Spruce Junior High School
100 E.7th st.
Gillette, WY 82716
kschofield@ccsd1schools.net

I Hereby certify that all participants in our Marching Band are currently eligible according to the rules of the WHSAA.

Signature (Principal or Superintendent)

RETURN COPIES BY SEPTEMBER 22, 2017



WYOMING HIGH SCHOOL ACTIVITIES ASSOCIATION

6571 EAST 2ND STREET
CASPER, WYOMING 82609
PHONE 307-577-0614 FAX 307-577-0637
WEBSITE: www.whsaa.org

**2017 ADVANCE TICKET ORDER
FORM**

Due to the large crowds we have had at this event the past few years, we are trying to avoid long lines for tickets by doing an advance ticket sale. Please have your band members purchase tickets for their family, friends, neighbors, etc. in advance. Tickets are \$6.00 for adults and \$5.00 for students K-12. High school students must present their WHSAA ID cards or high school ID card in order to purchase tickets at the student price. If no identification card is presented, adult prices will be charged. High school graduates are considered adults.

You may order as many advance tickets, as you want. We are asking that you turn in your advance **ticket money and any unsold tickets** at check in on October 14, 2017. **Return this form to the WHSAA, 6571 East 2nd Street, Casper, WY 82609.**

PLEASE ORDER TICKETS BY FRIDAY, OCTOBER 6, 2017

Your Name: _____

Name of School: _____

Address to mail tickets: _____

Adult Tickets _____ X \$6.00 ea. = \$ _____

Students Tickets _____ X \$5.00 ea. = \$ _____

TOTAL AMOUNT DUE WHSAA \$ _____

Please have all checks that you collect from advance ticket sales made payable to the WHSA
