

University Interscholastic League

Area Marching Band Contest

Official Entry Form

School: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Director: \_\_\_\_\_ Email: \_\_\_\_\_

School Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Conference: \_\_\_\_\_ Region: \_\_\_\_\_ Area: \_\_\_\_\_

**Certification:** I hereby certify that the students competing in the University Interscholastic League Area Marching Contest are eligible under Subchapter M of the *Constitution and Contest Rules*.

\_\_\_\_\_  
*Signature of Principal*

\_\_\_\_\_  
*Date*

Number of Students Participating in Competing Band \_\_\_\_\_

Amount of fees attached or paid prior to competition. \$ \_\_\_\_\_