
2024–2025 Leon High School Band

Student and Parent/Guardian Information Form

Student Information

Name: _____ Date of Birth: _____ Sex: _____

Address (Street, City): _____, FL Zip Code: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Email Address: _____

Middle School Attended: _____

Instrument(s)/Auxiliary Group (i.e., Leonettes or Scarlet Battalion): _____

Clothing Sizes

New/Rookie band members: You must complete this section.

Veteran band members: Complete this box ONLY IF you want new clothing or need a new size.

Polo Shirt Size: _____ T-Shirt Size: _____ Shorts Size: _____

Parent/Guardian Information

Parent/Guardian 1

Name: _____ Relationship to Student: _____

Address (Street, City): _____, FL Zip Code: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Work Phone: (____) _____ Occupation: _____

Primary Email Address: _____

Alternate Email Address(es): _____

I am interested in purchasing a Leon Band polo shirt (\$15 S–XL, \$18 2XL–4XL): Size: _____

Parent/Guardian 2

Name: _____ Relationship to Student: _____

Address (Street, City): _____, FL Zip Code: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Work Phone: (____) _____ Occupation: _____

Primary Email Address: _____

Alternate Email Address(es): _____

I am interested in purchasing a Leon Band polo shirt (\$15 S–XL, \$18 2XL–4XL): Size: _____