



*"Dream Maker" Band Alumni*



## **Membership Application**

Name \_\_\_\_\_

Address \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_

Phone Number \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Instrument(s) \_\_\_\_\_

Year of Graduation \_\_\_\_\_

Please select one of the following membership options:

One Year Membership = \$ 10.00

Five Year Membership = \$ 45.00

Ten Year Membership = \$ 80.00

Membership Fee's will help support the Eaglet Fund.

Please mail your completed application with dues payment to:

George Jenkins High School Band Boosters;

P.O. Box 5472 Lakeland, Florida 33807

*(Make Checks payable to "GJHS Band Boosters" & write "Alumni Membership" on memo)*

Questions? Visit: [gjhsband.com](http://gjhsband.com)

-or-

E-mail us: [dreammkrbndalumni@gmail.com](mailto:dreammkrbndalumni@gmail.com)