

GREENSBURG SALEM BAND PARENTS ASSOCIATION

Membership Application
2016 –2017 Season
Fee \$5.00 per person

Member Name(s): _____ Home Telephone: _____

Student Name(s): _____ Cell Phone: _____

Address: _____ Email: _____

City, State and Zip: _____ Check/Cash/MO: _____

Please make checks payable to Greensburg Salem Band Parent Association (GSBPA)

Grade(s) 7th Grade 8th Grade Freshman Sophomore Junior Senior

Component(s) Honor Guard Instrument Colorguard Majorette Dance Team Equipment Manager

COMMITTEE FORM

Please circle at least one committee/area of participation where you can help.
It takes a team of parents to support the band. Your help makes it easier for all of us.

- | | |
|------------------------------|-------------------------|
| Ad sales | Alumni Night |
| Auntie Anne's | Bake Sales/Receptions |
| Band Camp Lunches | Bingo |
| Chaperon Committee | Coffee House |
| Concession Stand | Family Picnic Committee |
| Hospitality Committee | Kennywood Committee |
| Membership Committee | Friday Night Tent Sales |
| Floral Easter Sale | Floral Mother's Day |
| Floral Poinsettia Sale | Nominating Committee |
| Publicity Committee | Sarris Easter candy |
| Sarris Christmas candy | Scrip Sales |
| Seat Cover Crew (home games) | Senior Night Committee |
| Spring Banquet Committee | Sub Sale |
| Thanksgiving Pie sales | Uniforms Committee |
| Yankee Candle | |

I am willing to help out as needed/short notice. Feel free to contact me.

I would like to chair/co-chair a committee
(Please list committee)

_____.



Thank you for your Support!