

JACKSON APPLE FESTIVAL BAND APPLICATION

P. O. Box 488  
Jackson, Ohio 45640

\_\_\_\_\_ YES, we would like to participate in the Apple Festival Parade(s) on (Select all that apply)

- \_\_\_\_\_ Wednesday Night ONLY.
- \_\_\_\_\_ Saturday Night ONLY
- \_\_\_\_\_ Both Wednesday and Saturday Night

\_\_\_\_\_ I choose **Competition** Participation (Saturday Parade Only)

\_\_\_\_\_ I prefer **Comments Only** (Saturday Parade Only)

\_\_\_\_\_ NO, we're not interested in participating this year.

Name of School: \_\_\_\_\_ School Phone: \_\_\_\_\_

Band Director: \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

Please complete the following if you are participating in this years festival parade(s)

Assistants to the Directors: \_\_\_\_\_

Band Name: \_\_\_\_\_

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

Total Playing Members in the Band: \_\_\_\_\_

Flag Corps: \_\_\_\_\_ Majorettes: \_\_\_\_\_

**Number of Busses:** \_\_\_\_\_ **Number of Equipment Vehicles:** \_\_\_\_\_

Additional Information (You may include a press packet)

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\_\_\_\_\_ Signature of Director

\_\_\_\_\_ Date

PLEASE RETURN THIS FORM TO:	Ryan Jones	<a href="mailto:rjones@ovbc.com">rjones@ovbc.com</a>
		or
	Jackson Apple Festival, PO Box 488, Jackson, OH 45640	