UNIVERSITY BAND APPLICATION





| oday's Date: _ | | ISU I#: | |
|-----------------|------------------------|---|-----------------------|
| | | | |
| ame | First | Middle | Last |
| ome Address | | Вох | |
| | Street Address or P.O. | Вох | |
| - | City | State State | Zip |
| hone () | | E-Mail | |
| irthdate | _// Na | ame of High School | |
| mergency Cor | ntact Name | | |
| mergency Cor | ntact Phone Number | - | |
| • | • | take prescription medications? Please lis | |
| | | TSU? Have you been admitted t | |
| ntended Colleg | ge Major | | |
| emester and y | ear you plan to ent | er TSU: Fall Spring | Summer 20 |
| re you a trans | sfer student from an | other college or university? School | ol |
| ist Any Prior D | Dance Training | | |
| | | | |
| lave vou previ | ously attending any | of the following TSU Band events? (Che | eck all that apply) |
| | nmer Band Camp | Fall Preview Day | sac an area appropria |
| | Admission to | o the Band Program is contingent upon a successfu | ul audition. |

Please print or type all information and return to: TSU Band, 3500 John A. Merritt Blvd., Box 9531, Nashville, TN 37209