Morris Brown Band Foundation

Band "School Daze" Reunion

July 31-August 1, 2020

REGISTRATION FORM

Name: _____

Organization: _____

Address: _____

Street Address *Apartment/Unit #*

_____

City *State* *ZIP Code*

Phone: _____ Email _____

Office Phone: _____ Fax Number: _____ Other Contact: _____

REGISTRATION

[ ] **FULL BAND MEMBER ACCESS**
Ticket Includes
(1) Band Member Admission (All Events - Friday & Saturday Day/Night)
(1) T-Shirt & (1) Souvenir for Band Member
(1) Non-Band Member Spouse/Guest Entry (Saturday Day/Night Only)
(2) Children (12 & under) Admission (Saturday Day Event Only)

[ ] Additional Tickets for Children 12 & UNDER for Saturday (Daytime) Event Only

IF YOU EXCEED 2 CHILD MINIMUM - Additional Tickets must be purchased.

(NO REFUNDS/NO EXCHANGES)

Name: _____ **Guest** _____

Child: _____ **Child** _____

PAYMENT DETAIL

( ) Check/ MO ( ) Cash

Amount Enclosed $ _____ **Payment Type**: ( ) Credit/Debit / Visa /MC/ AMX

Name: _____ Account # _____ Exp. Date: _____

Please send registration form along with check payable to: **Morris Brown Band Foundation**
Attn: MBBF Band "School Daze" Reunion
P.O. Box 92668 Atlanta, Georgia 30314

Contact: Keisha Harley or Keysha Thompkins: Email: mbcbandreunion@gmail.com

FORM MUST BE RECEIVE BY POST MARK DATE JUNE 15, 2020

Sponsored By: Morris Brown Band Foundation