

## Morris Brown Band Foundation Band "School Daze" Reunion SPRING/SUMMER 2021

REGISTRATIO	N FORM
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ame:			
rganization:			
Address:	SS		Apartment/Unit #
City Phone:		State	ZIP Code
Phone	Ema		
Office Phone:	Fax Number:	Other Contact:	
	REGISTRA	TION	
Recting and Member Admission (All Events - Friday & Saturday Day/Night) (Day)		[ ] Additional Tickets for Children 12 & UNDER for Saturday (Daytime) Event Only	
			IF YOU EXCEED 2 CHILD MINIMUM - Additional Tickets must
	uest Entry (Saturday Day/Night Only)	be purchased.	
	sion (Saturday Day Event Only)	(NO REFUNDS/NO EXCHANGE	
Name: Child:			
	PAYMENT DET	ſAIL	
			√ MO ()Cash
Amount Enclosed \$		Payment Type: () Credi	
Name:	Account #	Exp. Da	te:
Please send registration f	orm along with check payable to: Morris Br	own Band Foundation	
		Band "School Daze" Reunic	
	P.O. Box	x 92668 Atlanta, Georgia 303	14
C	ontact: Keisha Harley or Keysha Thompk	ins: Email: mbcbandreunior	n@gmail.com
	FORM MUST BE RECEIVE BY POS	ST MARK DATE APRIL15, 2	021
	Sponsored By: Morris Brown	n Band Foundation	