

LWC Blue Raider Band Confirmation/Information Form 2016-17

Name _____

Home Mailing Address _____

City _____ State _____ Zip _____ Home Phone() _____

Email
Address _____ Your Cell Phone () _____

Name of Parents:

Father: _____ Cell Phone() _____

Mother: _____ Cell Phone() _____

T-shirt Size _____ Shoe size _____

Resident or commuter? _____

If resident, what dorm? _____

Any medical issues that we need to be aware of? _____

Mail to: Tim Allen
210 Lindsey Wilson St.
Columbia, KY 42728

OR: This form is available at:
www.lindsey.edu/band
click on LWC Band information link,
fill out, and submit electronically.