

Referred by _____



2017 Southlake Carroll Dragon Guard Fall Cadet Workshop

Student Name: _____

Address: _____

City, State, Zip: _____

2017-2018 Grade (circle one): 5th 6th 7th 8th School _____

Parent / Guardian Name: _____

Parent Email: _____

Home Phone: _____ Parent Cell Phone: _____

Emergency Contact (if different than above): _____

Home Phone: _____ Cell Phone: _____

Students T-shirt Size (Unisex Adult Sizes): S M L XL XXL

Additional T-shirts for parent or family (Add \$15 per shirt): S M L XL XXL

Are there any special instructions we may need to know for this student? (allergies, etc) Yes No

If yes, please list here: _____

Students will rehearse on October 30th and November 2nd from 4:00-6:20PM at Carroll HS. The game will be at Dragon Stadium on November 3rd. Students will need to be at the visitors endzone gate by 6:15pm on game day. All students will be released to their parents following half time.

I understand that my child must be present for at least 1 rehearsal to be eligible for performance (please attach a \$75.00 payment by 10/27 made payable to Carroll Band Boosters)

Parent / Guardian Signature

Date

*These forms can be dropped off at the CHS Front Office (Attn: Adkison), DMS Attendance Office (Attn: Mrs. Moore) or can be dropped off/mailed to Sophie Pascal's home at 1400 Northridge Drive Southlake, Texas 76092 (817) 912-1385 joincarrollcadets@gmail.com.