

University Interscholastic League
Area Marching Band Contest

Official Entry Form

School: _____

Address: _____

City: _____ Zip _____

Director: _____ E-mail _____

School Phone _____ Cell Phone: _____

Conference 5A Region _____ Area D

School District _____

Certification: I hereby certify that the students competing in the University Interscholastic League Area Marching Band Contest are eligible under Subchapter M of the *Constitution and Contest Rules*.

Signature of Principal

Date

Number of Students Participating in Competing Band _____

Amount of fees attached or paid prior to competition \$ -0-

PLEASE SCAN & EMAIL THIS FORM AS SOON AS POSSIBLE
FOLLOWING YOUR REGION CONTEST TO: uilregion18@icloud.com
GERALD BABBITT, UIL AREA D, CLASS 5A MARCHING CONTEST.