

Parents: We'd like to learn more about you. Please fill out this form and turn it in to a Band Booster officer before you leave tonight.

Please list the name(s) of any child(ren) you have in band at Parkwood Middle or High.

Child's Name	Grade	Instrument They Play

We would love for each parent/guardian to complete a section below!

Parent/Guardian	Name: _____ Phone Number: (____) _____ - _____
	Email: _____
	My friends might describe me as (check all that apply):
	<input type="checkbox"/> Outgoing <input type="checkbox"/> A Motivator <input type="checkbox"/> A Handyman <input type="checkbox"/> Technical <input type="checkbox"/> Nurturing <input type="checkbox"/> A Wallflower <input type="checkbox"/> A Taxi Driver <input type="checkbox"/> One Who Takes Charge <input type="checkbox"/> Creative <input type="checkbox"/> Medical <input type="checkbox"/> A Cheerleader <input type="checkbox"/> Behind The Scenes <input type="checkbox"/> Task Oriented <input type="checkbox"/> Organized <input type="checkbox"/> Self Directed <input type="checkbox"/> A Party Animal <input type="checkbox"/> Connected <input type="checkbox"/> A Counselor <input type="checkbox"/> Quiet <input type="checkbox"/> A Homemaker <input type="checkbox"/> Fun Loving <input type="checkbox"/> A Shopper <input type="checkbox"/> Detailed <input type="checkbox"/> An Entrepreneur <input type="checkbox"/> Dependable <input type="checkbox"/> A Designer <input type="checkbox"/> An Optimist <input type="checkbox"/> A People Person <input type="checkbox"/> Resourceful <input type="checkbox"/> Adaptable <input type="checkbox"/> A Leader <input type="checkbox"/> Computer Savvy <input type="checkbox"/> Mechanical <input type="checkbox"/> Analytical <input type="checkbox"/> A Go Getter <input type="checkbox"/> Routine Oriented

Parent/Guardian	Name: _____ Phone Number: (____) _____ - _____
	Email: _____
	My friends might describe me as (check all that apply):
	<input type="checkbox"/> Outgoing <input type="checkbox"/> A Motivator <input type="checkbox"/> A Handyman <input type="checkbox"/> Technical <input type="checkbox"/> Nurturing <input type="checkbox"/> A Wallflower <input type="checkbox"/> A Taxi Driver <input type="checkbox"/> One Who Takes Charge <input type="checkbox"/> Creative <input type="checkbox"/> Medical <input type="checkbox"/> A Cheerleader <input type="checkbox"/> Behind The Scenes <input type="checkbox"/> Task Oriented <input type="checkbox"/> Organized <input type="checkbox"/> Self Directed <input type="checkbox"/> A Party Animal <input type="checkbox"/> Connected <input type="checkbox"/> A Counselor <input type="checkbox"/> Quiet <input type="checkbox"/> A Homemaker <input type="checkbox"/> Fun Loving <input type="checkbox"/> A Shopper <input type="checkbox"/> Detailed <input type="checkbox"/> An Entrepreneur <input type="checkbox"/> Dependable <input type="checkbox"/> A Designer <input type="checkbox"/> An Optimist <input type="checkbox"/> A People Person <input type="checkbox"/> Resourceful <input type="checkbox"/> Adaptable <input type="checkbox"/> A Leader <input type="checkbox"/> Computer Savvy <input type="checkbox"/> Mechanical <input type="checkbox"/> Analytical <input type="checkbox"/> A Go Getter <input type="checkbox"/> Routine Oriented