

# UNIVERSITY BAND APPLICATION

## Flag Corp

Today's Date: \_\_\_\_\_

Name \_\_\_\_\_ T# \_\_\_\_\_  
*Last First Middle*

Home Address \_\_\_\_\_  
*Street Address or P.O. Box*

\_\_\_\_\_ *City State Zip*

Phone (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_

Classification \_\_\_\_\_ GPA \_\_\_\_\_ Major \_\_\_\_\_

Previous Flag Experience: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Have you ever been a part of a TSU student organization? \_\_\_\_ YES \_\_\_\_ NO

If yes, what group(s)? \_\_\_\_\_

Do you have any injuries? \_\_\_\_ YES \_\_\_\_ NO

If yes, please list \_\_\_\_\_

Why do you want to be a member of the flag corp? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

