

# BUXTON HOMECOMING BAND APPLICATION

MARCHING BAND APPLICATION DEADLINE IS ON OR BEFORE AUGUST 25th

APPLICATION FORM FOR MARCHING BANDS ONLY (NO FLOATS)

Name of Band: \_\_\_\_\_

Address: \_\_\_\_\_

City/Province (state): \_\_\_\_\_ Postal Code \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Contact Fax: \_\_\_\_\_ Contact E-Mail: \_\_\_\_\_

Contact Web Site: \_\_\_\_\_ Kind of music played: \_\_\_\_\_

No. Of Musicians: \_\_\_\_\_ Color Guard: \_\_\_\_\_

Do You Have \_\_\_\_\_ Requested Honorarium \$ \_\_\_\_\_  
Your Own Banner ?

Description of your band

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MAIL COMPLETED ENTRY FORM TO:  
OR FAX: 519-352-8561

Buxton National Historic Site & Museum  
21975 A. D. Shadd Road  
North Buxton, Ontario N0P 1Y0