



**ATTACH  
2 PHOTOS EACH  
OF ALL  
PARTICIPATING  
MEMBERS  
(write name at the  
back of each photo)**

## **MUSIC BANDS REGISTRATION FORM**

Please fill in ALL the fields in the form.

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

Band Leader Name: \_\_\_\_\_

Band Leader Address: \_\_\_\_\_

Band Leader Contact: \_\_\_\_\_

Band Leader Email: \_\_\_\_\_

BL Institution: \_\_\_\_\_

Name & Contact No. of ONE other Band Member:  
\_\_\_\_\_

Names of Band Members (2-6, separated by commas):  
\_\_\_\_\_  
\_\_\_\_\_