

2. Payment: _____ x \$20.00 each = _____

Please make check payable to "TJHSST Band Boosters". *Thank you!*

3. Your Information: Name: _____ Phone: _____

Provide e-mail address, and you will receive e-mail when your order is available for pickup at the TJ front office:

E-mail Address: _____

Student's name: _____

SEND FORM AND CHECK payable to "TJHSST Band Boosters" to:

Meg Pasquerella 8410 Crown Place Alexandria, VA 22308
Questions? Contact megd@yahoo.com or 703-360-9458

THANK YOU FOR YOUR SUPPORT OF THE TJ BAND PROGRAM!