

TOB CHAPTER 8  
ANNOUNCER FORM

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

GROUP SIZE \_\_\_\_\_

Hometown \_\_\_\_\_

Director \_\_\_\_\_

Asst. Director \_\_\_\_\_

Staff \_\_\_\_\_

DRUM  
MAJORS \_\_\_\_\_

Musical Selections \_\_\_\_\_

Brief Accomplishments \_\_\_\_\_

**Reminder form will be used entire season so if any changes occur please submit new form**  
**Return ASAP Teresa Ross 812 Thornton Ave Greensburg, PA 15601**