

University Interscholastic League
Area E Marching Band Contest

Official Entry Form

School: _____

Address: _____

City: _____ Zip: _____

Director: _____ E-mail: _____

School Phone: _____ Fax: _____

Conference: _____ Region: _____ Area: _____

Certification: I hereby certify that the students competing in the University Interscholastic League Area E Marching Band Contest are eligible under Subchapter M of the *Constitution and Contest Rules*.

Signature of Principal

Date

Number of Students Participating in Competing Band _____

Amount of fees attached or paid prior to competition. \$ 350.00

Make checks payable to **UIL Area E Marching Contest**

NOTE: Turn in entry fee check when you check-in at the contest site.
Scan and email Entry Form by **Wednesday** immediately prior to contest date.

UIL Area E Marching Contest
Bill Cason, Executive Secretary
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Corpus Christi, TX 78403
Cell: 361-946-6432
UILMusicRegion14@gmail.com