

**Please reply before  
Thursday, May 18, 2017**

Student Name(s) \_\_\_\_\_

Senior Student \_\_\_\_\_

\_\_\_\_ # of Adult Reservations @ \$27 = \_\_\_\_\_

\_\_\_\_ # of Non-senior Band Students @ \$27 \_\_\_\_\_

\_\_\_\_ = # of Senior Band Students @ \$17 = \_\_\_\_\_

\_\_\_\_ # of Children (under 10) @ \$17 = \_\_\_\_\_

Amount Enclosed \$ \_\_\_\_\_

\_\_\_\_ # of Dietary Restricted Meals: \_\_\_\_\_

(describe)

Make checks payable to:  
**Troy High Band Boosters**