

Application Form

The 2nd International Marching Band·Baton Twirling Championship

Host Organization : General Social Corporation ,
Japan Marching Band Baton Twirling Association, Office of Championship

We are pleased to participate in The 2nd International Marching Band·Baton Twirling
Championship as per the details mentioned below.

---Details---

Date / / _____

Name of Participant			
Name of School Principle (Name of Representative of Schools etc)			
Name of Band Representative			
Contact Address			
T E L		F A X	
Cell Phone			
Class (Put mark *)	August 20(Saturday) Festival / August 21 (Sunday) Contest		
Area of Participation (Put mark *)	Marching Band / Baton Twirling / Color Guards		
Formation	Infants / Primary School / Junior High School / High School / Community		
Number of Participants	() persons		

* Please fill in fully at all parts.

* The data to be registered will be kept with strict care for filing and will be deleted after the use.