

**THE BLUE DEVILS MEMBER INFORMATION SHEET 2008**

FULL LEGAL NAME \_\_\_\_\_ SEX \_\_\_\_\_ AGE \_\_\_\_\_

PERMANENT ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTRY \_\_\_\_\_

LOCAL ADDRESS (complete AFTER you have moved!) \_\_\_\_\_

CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

PERMANENT TELEPHONE \_\_\_\_\_ LOCAL TELEPHONE \_\_\_\_\_

CELL/PAGER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

DATE OF YOUR BIRTH \_\_\_\_\_ CITY AND STATE OF BIRTH \_\_\_\_\_  
(mo/day/year)

MOTHERS (MAIDEN) NAME ON BIRTH CERTIFICATE: \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_ PASSPORT #: \_\_\_\_\_

NAME/CITY/STATE OF HIGH SCHOOL YOU ATTENDED: \_\_\_\_\_

SECTION OF CORPS Brass Percussion Instrument: \_\_\_\_\_ Color Guard

PREVIOUS CORPS EXPERIENCE (Corps name and year(s) marched): \_\_\_\_\_

FATHER'S CONTACT INFORMATION

MOTHER'S CONTACT INFORMATION

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City/St/Zip \_\_\_\_\_

City/St/Zip \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

IF YOUR PARENTS DO NOT LIVE TOGETHER, WHO SHOULD RECEIVE INFORMATION?  
FATHER \_\_\_\_\_ or MOTHER \_\_\_\_\_

ADDITIONAL EMERGENCY CONTACT: \_\_\_\_\_  
(name and full phone number)

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF PARENT \_\_\_\_\_ DATE \_\_\_\_\_  
(if applicant under age 18)