

Washington
High School
Band



SIDE ONE

WHS Band
YARD SIGN ORDER

Warrior



Marching Band

SIDE TWO

Name: _____

Email: _____

Phone: _____

Student: _____

Student's Band (i.e. Freshman, Varsity, etc.) _____

Is it OK to send the sign(s) with your student? _____ YES _____ NO

If you answered "NO" above, we will contact you to arrange pickup or delivery.

How many signs do you want? _____

x _____ \$20 each

TOTAL DUE:

Payment: Check # _____

Cash _____

Delivered or sent with student on _____

(date)