



The Texas Bandmasters Association thanks the following company for sponsoring our pre-registration:



Texas Bandmasters Association

73rd Annual Convention/Clinic
Thursday-Saturday, July 23-25, 2020

Henry B. Gonzalez Convention Center
San Antonio, Texas

2020 TBA ACADEMY PRE-REGISTRATION FORM

Texas Bandmasters Association • 1002 Central Parkway South • San Antonio, Texas 78232 • Phone (210) 492-8878 • Fax (210) 492-8996

Personal Information

Dr/Mr/Mrs/Ms _____ First Name _____ M.I. _____ Last Name _____ Suffix: Jr/Sr _____

Home Street Address _____

Home City _____ Home State _____ Home Zip Code _____

Contact Information

Primary Phone Number _____ Alternate Phone Number _____

Email Address **A valid email address is required to receive an electronic registration receipt.** _____

Yes No I wish to receive useful and timely industry-related correspondence from TBA affiliated vendors and / or screened outside organizations.

School/Employment Information (If Applicable)

CHECK ONE: HS Director HS Assistant Director MS Director MS Assistant Director Elementary Director

School Name _____

School District _____

School Street Address _____

School City _____ School State _____ School Zip Code _____

School Phone _____

Survey Information

FROM WHERE DID YOU RECEIVE YOUR DEGREE(S):

Undergraduate: _____

Masters: _____

Doctorate: _____

TBA ACADEMY

(Check items for payment)

TBA Academy Fee (Lunch Provided) \$100

Includes:

1 YEAR COMPLIMENTARY TBA ACTIVE MEMBERSHIP,
CONVENTION, BUSINESS LUNCHEON,
AND BBQ (\$175 value)

Credit Card (Complete lines below)

Check (payable to the Texas Bandmasters Association)

Credit Card Number

Name on Credit Card

Expiration Date (MM/YY)

Credit Card Billing Address

City

State

Zip Code

New Teacher Certification:

(Signature Required)

I certify that I am a new teacher beginning my career – Fall 2020 and that I am eligible to attend the TBA Academy for \$100.

Signature: _____

FOR OFFICE USE ONLY

Amount Received \$ _____ Date Received _____

Clerk Initial _____

Method of Payment:

Check# _____ Credit Card Cash