

***2010 Legacy Marching Festival***  
**INITIAL APPLICATION AND LETTER OF INTENT**  
***October 9, 2010***  
***Adams 12 Five Star Stadium***

(Applications and fees must be received by Friday, September 10, 2010)

**Please Type:**

School: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Director(s): \_\_\_\_\_

Best time(s) and number to reach the Director: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

School Phone: \_\_\_\_\_ School Fax: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ CBA Class: \_\_\_\_\_

Check all that apply:

**Entry Fee: \$300.00**                       **Extra Tape: \$25.00**  
 **Clinic Fee: \$75.00**

We understand that in order to perform, we must provide the Legacy Marching Festival with the written releases to perform copyrighted music, visual programs, and/or any special musical arrangements from the owners of those performance rights. We also understand that should a band not provide said materials, they will not be allowed to perform (forms will be included in the Festival "Pre-Packet" and Festival "Final Packet"). Also, we understand that we will not be scheduled for a performance position or clinic without the receipt of the "Initial Application and Letter of Intent," "Entry Fee," and "Other Fees" if applicable.

\_\_\_\_\_  
*Band Director Signature*

\_\_\_\_\_  
*Principal Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Date*

Send Completed Application, the \$300 Fee, and Clinic or Extra Tape fees to:  
Legacy Marching Festival  
Attn: Clay Stansberry  
2701 W. 136<sup>th</sup> Avenue  
Broomfield, CO 80023

***(No purchase orders will be accepted. Make checks payable to "Legacy Band Boosters.")***