

UWGA Application for Membership

Unit Information

Unit Name:	
Director:	
Home Address:	
City:	
State:	
Zip Code:	
Home Phone #:	
Daytime Phone #:	
Cell Phone #:	
E-Mail Address:	

School Information - Scholastic Units Only

Band Director:	
E-Mail Address:	
School Address:	
City:	
State:	
Zip Code:	
School Phone #:	
School Fax #:	

Please Circle:

I would prefer all correspondence to be mailed to: Home Address OR School Address

Classification

Please Circle:

Scholastic Regional AA
Scholastic Regional A
Scholastic Intermediate A
Scholastic A
Scholastic Open
Scholastic World

Independent A
Independent Open
Independent World

Please print out and complete and either e-mail to uwga@hotmail.com or mail to:

UWGA
35 Orange Street
Salt Lake City, UT 84116