



Cumberland Valley High School
 Marching Band Boosters Club
 P.O. Box 173
 New Kingstown, PA 17072
 www.cvhs-band.org

Dear Director:

The Cumberland Valley Band Boosters cordially invite you and your band to participate in the 38th annual “Echoes in the Valley” Marching Band Competition on Saturday, October 16, 2010 at 5:00 PM at CV’s Chapman Field. The rain date for this event is Tuesday, October 19, 2010. We are proud of our stadium and other facilities at Cumberland Valley High School which will provide an excellent venue for this Tournament of Bands Competition. The stadium features closed bleachers that are similar in height and press box vantage point to Hersheypark Stadium, giving you a wonderful view of your band a few weeks before ACCs. The field enjoys easy access off Route 11, near the Pennsylvania Turnpike and Interstate 81, in scenic Cumberland County.

You can respond and reserve your space at Echoes in the Valley by returning this form to the address listed below, e-mailing Carri Kunkle at bandmom12@comcast.net with the registration information or by visiting our website at www.cvhs-band.org and completing the online registration form.

The contact person for reservation or event questions for “Echoes in the Valley” is **Carri Kunkle**. She can be contacted by e-mail at bandmom12@comcast.net or by phone at **717-343-4507 (cell)**. Bands will march by Group in reverse order based on the date we receive your registration. Your prompt response will ensure that your band marches later in the show! We will e-mail a confirmation of your registration. Please add Mrs. Kunkle to your address book so that you receive her confirmation and future communications.

We look forward to hearing from you soon, and wish your marching band a successful 2010 season!!

Sincerely,

Scott Ainscough
 Director of Bands
 Cumberland Valley High School

Return to: Cumberland Valley Band Boosters
 P.O. Box 173
 New Kingstown, PA 17072
 Attn: Carri Kunkle
 Phone: 717-343-4507

“Echoes in the Valley” Registration Form

School Name: _____

Director’s Name: _____

Work Phone Number: _____ Alternate Phone Number: _____

E-mail (school): _____ E-mail (alt): _____

School Colors and Mascot : _____

Number of buses: _____ Number of equipment trucks: _____

TOB Group: I II III IV (Please circle one) TOB Division: Festival Regional Championship