

Steel City Sound Youth Ensemble

Membership Form - 2010/2011 Season

Date: _____

Name: _____ Email: _____ @ _____

Address _____

City _____ Postal Code: _____ Age: _____

Phone: _____ Date of Birth: _____

School: _____ Grade: _____

Mother's Name: _____ Mother's Cell _____

Employer: _____ Mother's Email: _____ @ _____

Father's Name: _____ Father's Cell _____

Employer: _____ Father's Email: _____ @ _____

FINANCIAL OBLIGATIONS:

Dues are \$10 per month by post dated cheques from October 1, 2010 - May 1, 2011. 8 Cheques total or 1 cheque for \$50 (Save \$30). Family Plan (2 or more children from same family) \$20 per month or 1 cheque for \$100. Members are responsible for the cost of meals while on trips as well as any extra medical insurance.

AGREEMENT OF MEMBERS:

1. I realize, and agree, that missed rehearsal and performances without good reason, are cause for suspension.
2. I have my parents/guardian's full approval to be a member.

AGREEMENT OF PARENTS/GUARDIAN:

We, the parents / guardian of the above named, guarantee that we are fully covered by Liability and Accident Insurance and hereby absolve, and hold blameless, the Director, Management and Staffs of the STEEL CITY SOUND YOUTH ENSEMBLE and/or PRIZM WINTER GUARD in the event of accident, or any other misadventure. Further, we promise to pay the cost of the instrument, or other equipment that is lost or stolen or damaged through misuse or abuse. Also, I give permission for my son/daughter to travel with Steel City Sound Youth Ensemble / Prizm Winter Guard including cross border trips to New York State.

Parent/Guardian: _____ Date: _____

I found out about your organization from: (Please circle)

Friend/Relative Spectator Cable 14 Radio Mountain News School Flyer Flyer Mall Booth