

Rehearsal Schedule		
Wednesday Nights Band on the Bow Riverside Jazz	Director: Adam Mailman 7:00pm – 8:45pm 8:45pm – 10:30pm	Bow Valley High School
Thursday Nights Choral Waves	Director: Diego Bechthold 7:00pm – 8:45pm	Bow Valley High School
Rehearsals start September 4/5, 2019		

Membership Fees			
Joining in January? Pay ½ Ensemble(s) Fee			
	First Ensemble	\$300	
	Second Ensemble	\$150	
	Third Ensemble	\$0	
	1st	2nd	3rd
	\$300		\$300
	\$300	\$150	\$450
	\$300	\$150	\$450
Make cheques payable to: <u>Cochrane Music Society</u>			

Complete and return with payment to CMS Ensemble Representative

Name:		Home Phone:	
Address: Street		City	PC:
E-Mail Address: <i>(all information is distributed by email/website)</i>		Cell Phone:	

Ensemble Choices and Fees	
<input type="checkbox"/> Band on the Bow Instrument: _____ <input type="checkbox"/> Riverside Jazz Instrument: _____ <input type="checkbox"/> Choral Waves <input type="checkbox"/> Soprano <input type="checkbox"/> Alto <input type="checkbox"/> Tenor <input type="checkbox"/> Bass	FULL PAYMENT is required at the beginning of the season in one current, or ½ current + ½ postdated, or a series of postdated cheques. Total Fee: \$ _____ Sept 2019 OR Cheque 1: \$ _____ Sept 2019 Cheque 2: \$ _____ Jan 2, 2020 OR Series: \$ _____ Dates: _____

Complete ALL Parts, Date and Sign

How did you find out about CMS? _____

Volunteer Commitment
Please indicate in which of the following volunteer activities you are willing to assist.

<input type="checkbox"/> <i>CMS Board Director (9)</i> <input type="checkbox"/> <i>Event Photographer</i> <input type="checkbox"/> <i>Workshop Organizer</i>	<input type="checkbox"/> <i>Concert Stage Manager</i> <input type="checkbox"/> <i>Concert Set Up/Take Down (12)</i> <input type="checkbox"/> <i>Other</i> _____
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Right of Publicity
From time to time, the CMS publicizes information about its members to the community through various media such as newsletters, displays, internet website and press releases. In order to avoid misunderstandings about privacy and use of personal information we ask permission from each member to publish names, photographs and/or video images.
 I give the Cochrane Music Society permission to publish my name and picture.

Consent to Share Contact Information Within the Society
With written consent, members' contact information may be shared within the membership to help learn each others' names, contact for car pooling, plan social activities, etc. Members may NOT use this contact information for solicitation.
 I give the Cochrane Music Society permission to share my contact information within the membership. I understand that I may NOT use members' contact information for solicitation.

Digital Communication
According to Canada's anti-spam legislation, we are asking for your express consent to send you our subscription communications.
I wish to receive the following from Cochrane Music Society:
 website news posts of CMS and other groups' events *emails of CMS program and service communications and surveys*

Date: _____ **Signature:** _____