

Rehearsal Schedule		
<b>Wednesday</b> Band on the Bow Riverside Jazz	7:00pm – 8:45pm 8:45pm – 10:30pm	Cochrane High School
<b>Thursday</b> Choral Waves	7:00pm – 8:45pm	Cochrane High School
<b>Rehearsals start January 11/12, 2023</b>		

Fees			
<b>Joining in January</b>			
Membership	\$10		
First Ensemble	\$167.50		
Second Ensemble	\$87.50		
Membership	1 <sup>st</sup>	2 <sup>nd</sup>	Total
\$10			\$10.00
\$10	\$167.50		\$177.50
\$10	\$167.50	\$87.50	\$265.00
<b>Make cheques payable to: <a href="#">Cochrane Music Society</a></b>			

**Complete and return with payment to CMS Ensemble Representative**

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

Ensemble Choices and Fees					
<input type="checkbox"/> <b>Band on the Bow</b> Instrument: _____ <input type="checkbox"/> <b>Riverside Jazz</b> Instrument: _____ <input type="checkbox"/> <b>Choral Waves</b> <input type="checkbox"/> Soprano <input type="checkbox"/> Alto <input type="checkbox"/> Tenor <input type="checkbox"/> Bas	<b>FULL PAYMENT is required at the beginning of the season</b>  <b>Total Payment:</b>  <table style="margin: auto;"> <tr> <td style="text-align: center;"><u>1 Ensemble</u></td> <td style="text-align: center;"><u>2 Ensembles</u></td> </tr> <tr> <td style="text-align: center;">\$177.50</td> <td style="text-align: center;">\$265.00</td> </tr> </table>	<u>1 Ensemble</u>	<u>2 Ensembles</u>	\$177.50	\$265.00
<u>1 Ensemble</u>	<u>2 Ensembles</u>				
\$177.50	\$265.00				

**Complete ALL Parts, Date and Sign**

**How did you find out about CMS?** \_\_\_\_\_

**Health and Safety Declaration**  
CMS requires that all members abide by health measures that are in effect under government, facility or Society guidelines, which may change from time to time, as deemed necessary.  
 *I hereby declare that I shall abide by health measures that are in effect under government, facility or Society guidelines, which may change from time to time, as deemed necessary.*

**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:** \_\_\_\_\_