

2024 SPRING REGISTRATION

Rehearsal Schedule					
Wednesday Band on the Bow Riverside Jazz	7:00pm – 8:45pm 8:45pm – 10:30pm	Bow Valley High School			
Thursday Choral Waves	7:00pm – 8:45pm	Bow Valley High School			
Rehearsals start January 10, 11, 2024					

Membership Fees						
Fees for January to May						
Membe	rship	\$10				
First Ensemble		\$175				
Second Ensemble		\$92.50				
Membership	1 st	2 nd	Total			
\$10			\$10			
\$10	\$175		\$185			
\$10	\$175	\$92.50	\$277.50			
Make cheques payable to: Cochrane Music Society						

Complete and return with payment to CMS Ensemble Representative						
Name:		Home Phone:				
		Cell Phone:				
Address: Street	City		PC:			
E-Mail Address: (all information is distributed by email/website)						
Ensemble Choices and Fees						
□ Band on the Bow Instrument:	FULL PAYMENT is required at the beginning of the session					
□ Riverside Jazz Instrument: ————	1 Ensemble \$185 2 Ensembles \$277.50					
□ Choral Waves □ Soprano □ Alto □ Tenor □ Bas						
Complete ALL Part	ts. 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 of website and press releases. In order to avoid misunderstandings about private to publish names, photographs and/or video images. ☐ I give the Cochrane Music Society permission to publish my name.	cy and use of personal inf					
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 	3					
Date: Signature:						