



Summer Guest Musician Form

Please PRINT your information LEGIBLY

Name: _____

Email: _____

Instrument(s): _____

Phone(s): (home) _____ (cell) _____

Address: _____

postal code: _____

By my signature below I apply to join the WESTSHORE COMMUNITY CONCERT BAND as a guest, and agree to be bound by its rules and obligations, to safeguard its music, equipment, uniforms and facilities, and to participate to the best of my abilities in its musical life.

I acknowledge that music and any other assets signed out to me is on loan only while I participate in band functions and must be returned promptly when requested or when I cease to play with the Band. If I will be unable to attend a rehearsal or performance I will not take music home but will leave it with another band member or at the rehearsal venue so that others may make use of it during my absence.

I promise not to attend WCCB functions while I have symptoms of any illness, and will advise the conductor or a board member of my intended absence.

Today's Date: _____

Signature: _____

Please sign below if you consent to having your contact information distributed to other band members. If consent is not given your contact information will be seen/used only by the Band directors.

Signature: _____

Comments: _____

Guest Fees

[This portion of the form may be retained by the Treasurer, so please complete it legibly also.]

For a DONATION of \$30 or more to the WCCB you will receive a tax receipt and no guest fee will be charged.

Fees/donations may be paid by e-transfer sent to payment@westshoreband.org or by debit or credit card.

Please make cheques payable to "Westshore Community Concert Band".

Name: _____

I plan to attend for the summer season (July-August).

Donation amount: \$ _____ Paid by: Cash ___ Cheque ___ E-transfer ___ Debit/Credit Card ___

OR

Summer fee: \$25 Paid by: Cash ___ Cheque ___ E-transfer ___ Debit/Credit Card ___

Paid (date) _____ Received by _____

I plan to attend on a casual basis and will pay the drop-in fee each time.

Drop-in fee: \$5 per evening Paid by: Cash ___ Cheque ___ E-transfer ___ Debit/Credit Card ___