



Trumbull Percussion Regional Practice Site Contract

Group Name		Class	
Person to receive correspondence			
Address			
City, State, Zip			
Email		Phone with area code	

We would like to contract for hours of practice time as follows:

First Option: Prelims Finals

We would prefer times on _____ between _____ and _____
(Date) (Time AM/PM) (Time AM/PM)

Second Option: Prelims Finals

We would prefer times on _____ between _____ and _____
(Date) (Time AM/PM) (Time AM/PM)

Third Option: Prelims Finals

We would prefer times on _____ between _____ and _____
(Date) (Time AM/PM) (Time AM/PM)

We understand the cost for practice to be **\$85 per hour with a 50% down payment** to be submitted to the practice site chairperson by **February 5th**. **PRACTICE TIME AFTER THAT DATE CANNOT BE GUARANTEED.** If we are not going to need the facilities, we will contact the chairperson prior to **February 5th** for a full refund. Refunds after that date are at the discretion of show sponsor. The remaining owed will be paid at unit check-in prior to competing.

Make checks payable to: **THSGEMB**

Signed by _____

Position _____

Please print this form and mail with payment to:

Kavetha Velavan
35 Topaz Lane
Trumbull, CT 06611

Phone: 203-543-6125
Email questions to: Kvelavan@cybersolutionsllc.com