

Musician Agreement and Contact Information



2019-2020 Concert Season

Name _____

Address _____ City _____

State _____ Zip _____; Email _____

Please Print Clearly

Phone _____; Mobile _____

Instrument & Section (if appropriate) you have played previously _____

I have reviewed the rehearsal and performance schedule for the Grande Ronde Symphony Orchestra's 2019-2020 season, and I am committing to participate in:

_____ All rehearsals & performances (barring unforeseen circumstances)

_____ At this time I know I will not be available for the following:

_____/_____/_____

Musicians' Signature

Date Signed

On behalf of the Board of Directors of the Grande Ronde Symphony Association, I thank you for your tremendous contribution of time, energy, and musicianship.

Alice Trindle, President