



Omaha CG 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 _____ (Date) between _____ (Time AM/PM) and _____ (Time AM/PM)

Second Option: Prelims Finals

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

Third Option: Prelims Finals

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

We understand the cost for practice to be \$90 per hour with a 50% down payment to be submitted to the practice site chairperson by January 31st. PRACTICE TIME AFTER THAT DATE CANNOT BE GUARANTEED. If we are not going to need the facilities, we will contact the chairperson prior to January 31st 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: Bellevue East Band Boosters

Signed by _____

Position _____

Please print this form and mail to:

Bellevue East High School
Band Office/Charles Wright
1401 High School Drive
Bellevue, NE 68005

Phone: 402-297-7766
Email: Charles.wright@bpsne.net

If you prefer to pay by credit card, please email this form to Charles.wright@bpsne.net.

MasterCard or VISA ONLY

_____-_____-_____-_____

Exp Date ____/____ CVV _____

All credit card transactions may be charged additional fees.