



## Indianapolis 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 **\$85 per hour with a 50% down payment** to be submitted to the practice site chairperson by **January 25th. 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 25th** 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: **Warren Performing Arts Association (WPAA)**

Signed by \_\_\_\_\_

Position \_\_\_\_\_

### Please Print this form and Send to

Warren Central High School  
Attn: Ed Meckes/ Band Room  
9500 East 16<sup>th</sup> Street  
Indianapolis, IN 46229

Phone: 317-691-9150  
Email: emeckes@warren.k12.in.us