



Gulfport 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 _____ 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 **\$75 per hour with a 50% down payment** to be submitted to the practice site chairperson by **January 27th**. **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 27th** 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: **Admiral Band Boosters**

Signed by _____

Position _____

Please Print this form and Send to

Gulfport High School
Attn: Westley Morehead/Band Office
100 Perry Street
Gulfport, MS 39507

Phone: 228-896-7878

Email questions: Westley.morehead@gulfportschools.org

If you prefer to pay by credit card, please email this form to westley.morehead@gulfportschools.org

MasterCard VISA Discover AMEX

_____-_____-_____-

Exp Date ____/____ CVV ____

Credit card transactions may be charged transaction fees.