## ACPBA 2022 Band Membership Form

## **Contact Information**

Primary Contact Name:		
Address:		PAND ASSOCIA
Phone Number:		
Email:		
Band Name:		
Website:		
Grade:		
Pipe Major Name:		
Drum Sergeant Name:		
Band membership rates if paid:	Submit membership form	and fee to:
Before January 1 <sup>st</sup> : \$175.00 After January 1 <sup>st</sup> , before April 1 <sup>st</sup> : \$225.00 After April 1 <sup>st</sup> : \$275.00	ACPBA Membership Coord C/O Mike Dupuis 92 Higgins Street Truro, NS, B2N 2L7 mgedupuis@yahoo.ca	linator
Cheques can be made payable to "Atlantic Car	nada Pipe Band Association"	
Please allow at least two weeks for processing. payment has been received and processed by t	·	ssed until
Consent to Release Information:		
I, the undersigned, give permission for the Atla release the band's mailing information to corpo other partners to send related mailings to the be sold.	orate members, sanctioned high	nland games, and
I authorize the ACPBA to list the band's contact	t information on the website.	Yes [ ] No [ ]
Signature		

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Player's Name:	Instrument: