



**SHRINE MAPLE SUGAR BOWL INC.
INCORPORATED**

FOOTBALL GAME & PAGEANT

Benefits Shriner's Hospitals for Children
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CONSENT OF MUSICIAN

I, _____, hereby agree to participate with the Shrine Maple Sugar Bowl All Star Band, take part in 2 days of rehearsals (dates and location to be announced) and play in the pregame parade and halftime show on Saturday, August 3, 2019 which will be held at Castleton University, Castleton, VT.

I agree to abide by all the rules and regulations to be established by the Band Directors.

Furthermore, I understand that I may be deemed ineligible if, at any time, my conduct is found to be inappropriate. The respective Band Directors and the Shrine General Chairman will determine this.

DATE: _____ SIGNED: _____
(Musician)

Instrument you play: _____

T-Shirt Size: _____

CONSENT OF PARENT OR GUARDIAN

I, _____, give my son or daughter permission to participate with the Shrine Maple Sugar Bowl All-Star Band and participate in the pregame parade and halftime show on Saturday, August 3, 2019.

DATE: _____ SIGNED: _____
(Parent or Guardian)