



Sudbury and District Pipes and Drums Association



Membership Information

Surname: _____
 Given Name: _____
 Nick Name: _____
 Date of Birth: _____
 Band Position: _____
 Email Address: _____
 Home Address: _____
 Phone Number: _____
 Cell Number: _____
 Emergency Number: _____
 Emergency Contact: _____

Application For Membership

I, _____ apply for membership in the Sudbury and District Pipes and Drums Band Association.

- *I agree to comply with and abide by, the Constitution, it's bylaws, and the band rules (code of conduct).
- *I will also make every reasonable attempt to maintain my status as an active / playing member of the band.
- *I understand that the Membership Committee, which in turn will submit it's recommendation for a Membership meeting for acceptance or rejection, will review this Application.
- *In the event of a minor, a parent or legal Guardian must be present for the annual membership meeting. Refer to code of conduct.

Signed: _____ Date: _____

Date membership approved: _____

Signed: _____ Signed: _____
 (Pipe Major) (President)

"PIPERS FOR ALL OCCASIONS"