



**ARSENAL**  
PERFORMING ARTS

## Duke City Drum-Off Ensemble Participation Agreement

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### Ensemble Information

School \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

DrumLine Name (if applicable) \_\_\_\_\_

Number of Performers \_\_\_\_\_

### Primary Contact Information

Name \_\_\_\_\_ Title \_\_\_\_\_

Email: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

### Secondary Contact Information

Name \_\_\_\_\_ Title \_\_\_\_\_

Email: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Check One:

☐ I have acquired liability insurance for my team.

Insurance Carrier \_\_\_\_\_ Policy Number \_\_\_\_\_

Name on Policy \_\_\_\_\_

☐ I have not acquired liability insurance for my team and acknowledge that all performers must sign a liability waver and in doing so give up their rights to sue Arsenal Performing Arts and Drum Corps International in the event of accidental injury.

### Copyright Notice

By signing below, I affirm that I have obtained legal permission to perform all musical selections to be used by my ensemble during the Duke City Drum-Off, including material purchased as part of our school production, written for my ensemble by a third party, or sampled from other ensembles.

I have read the above agreement and affirm that all information provided is correct.

Primary Contact Signature \_\_\_\_\_ Date \_\_\_\_\_

Secondary Contact Signature \_\_\_\_\_ Date \_\_\_\_\_