

Keystone Music Association (KMA)
Sales Permission and Participation Agreement
Between
Parents(s)/Guardian(s) and the Keystone Music Association (KMA)
For the school 2009- 2010 school year

I give permission for the student(s) named below to participate in the sales programs authorized, coordinated and conducted by the Keystone Music Association.

I understand that the signed copy of this permission slip and participation form must be on file with the KMA to enable my child to participate in any sales project as described above.

I understand that all student profit generated by the names student will be deposited directly into the Keystone Music Association Tracking Account in the above student's name. (All members of the same family will have a combined account).

I accept the responsibility for full and prompt payment for all items ordered by my child/children. I further understand that this payment must be made by a single check or money order (from parent/guardian) payable to the Keystone Music Association (KMA).

I agree to pay for all expenses (returned check fees, certified mail, legal fees, penalties, etc.) incurred by the KMA in efforts to collect delinquent moneys my child/children owes. If necessary, legal action(s) will be taken to collect delinquent accounts. Chronic problems in pick-up of merchandise ordered and/or payment for those items may result in suspension or loss of sales and tracking privileges.

Please complete this form and return it to the KMA basket located in the High School Main Office.

Please list all student(s) in the same family: High School & Elementary School.

Student Name:_____ Grade:_____ Year of Graduation:_____

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Student Name:_____ Grade:_____ Year of Graduation:_____

Parent/Guardian (s) Name:_____ Home Phone:_____

Email Address:_____ Cell Phone:_____

Home Address:_____ City:_____ Zip Code:_____

- _____ I have received a copy of the Student Tracking Policy.
- _____ I have read the policy and understand the provisions of the policy.
- _____ I hereby agree to let my child/children participate in this program and to fully comply with the program and the terms of the permission and participation agreement.

Parent or Guardian's Signature:_____ Date:_____