

# Godley High School WildCat Band 2009-2010 Registration Form

*(Please Print)*

Name \_\_\_\_\_

Instrument \_\_\_\_\_

Address \_\_\_\_\_ Grade \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

T-Shirt Size \_\_\_\_\_ Shoe size \_\_\_\_\_

Parent 1 Name \_\_\_\_\_

Parent 2 Name \_\_\_\_\_

Home Phone \_\_\_\_\_

Parent 1 Cell \_\_\_\_\_

Parent 2 Cell \_\_\_\_\_

Parent 1 Work \_\_\_\_\_

Parent 2 Work \_\_\_\_\_

Parent's email \_\_\_\_\_

Student's email \_\_\_\_\_

## FEES

Band Shirt \$15 (Summer Uniform) Adult Size \_\_\_\_\_

Two Pair Band Gloves \$5 (percussion do not need gloves).

Shoes \$30 (If you want your own new pair, otherwise we provide them used for free).

Band Parent shirts (\$15 each) Adult Size(s) \_\_\_\_\_

Instrument maintenance fee \$25 (School owned instruments only. You may wave this fee if you take full responsibility for the maintenance of the instrument).

Total \_\_\_\_\_

check # \_\_\_\_\_

## Forms Checklist:

Medical Form

Uniform Agreement

Instrument Agreement

8-hour rule

Instrument serial number \_\_\_\_\_

# Godley WildCat Band

## Medical Release Form 2009-2010

*(Please print)*

Student's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Student Cell Phone: \_\_\_\_\_

Parent/Guardian #1: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Ext: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Parent #1 Email: \_\_\_\_\_

If unable to reach parent/guardian, please notify:

Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Student Email: \_\_\_\_\_

Parent/Guardian #2: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Ext: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Parent #2 Email: \_\_\_\_\_

Relationship: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

### Student's General Health Information

**Does your child take medicine?** YES NO (circle one)

(A completed and signed *School Medication Prescriber/Parent Authorization Form* is required for each medication (prescription or over-the-counter) medication to be administered during the field trip).

**Does your child have allergies?** YES NO If yes, please list: \_\_\_\_\_

**Does your child require medicine to treat severe allergic reactions to insect stings/bites, food, ect.?**

YES NO (If yes, please the steps to be followed and fill out the *School Medication Prescriber/Parent Authorization Form*.)

**Does your child have asthma?** YES NO

(If yes, a completed and signed *School Medication Prescriber/Parent Authorization Form* is required for each medication (prescription or over-the-counter) medication to be administered during the field trip

**Does your child wear contact lenses?** YES NO

Date of your child's last Tetanus Booster Shot \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Is there a health history that may assist the person in charge if this student should become ill?**

Family Physician: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

Insurance Company \_\_\_\_\_

Group Number: \_\_\_\_\_ Certificate Number: \_\_\_\_\_

**I give my child permission to travel with and participate in all of the supervised activities of the Godley High School Band. To the best of my knowledge, he/she is physically fit to engage in such activity and is not suffering from any disease or injury.**

**I agree and do hereby waive and release all claims against the Godley Independent School District and any teacher, employee or other person engaged in the activity in question and agree to hold them harmless from any and all liability relating to my son/daughter for any personal injury or illness that may be suffered or any loss of property that may occur.**

**I also authorize the Godley High School Band Directors to act on my behalf if an accident occurs and my child needs medical attention.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Agreement for the Use of Band Uniform 2009-2010

*(Please print)*

Student Name \_\_\_\_\_

Coat # \_\_\_\_\_

Pant # \_\_\_\_\_

Hat # \_\_\_\_\_

Plume \_\_\_\_\_

Arm Guards \_\_\_\_\_

Student and parent agree to the following:

- return the uniform, with all parts, in the same condition, considering normal usage.
- take personal responsibility for the uniform at school, at home, performance
- pay for all damages that may incur.
- return the uniform when requested by the director.
- provide your own white socks, white tennis shoes and Khaki shorts (shorts, white socks, and white tennis shoes are part of the summer uniform).
- pay replacement cost of any missing item.
- student loses the privilege of wearing the WildCat Band Uniform if they do not show proper care and consideration in how they wear, transport, or behave while engaged in an activity associated with the band.

Marching Uniform Replacement Cost:

Coat: \$290

Pants: \$65

Uniform Shirt \$10

Hat: \$35

Hat Box: \$15

Plume: \$20

Garment Bag: \$16

Hanger \$4

Student signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Director approval \_\_\_\_\_ Date \_\_\_\_\_

**(There is no charge for the use of the uniform. The school will clean the uniform at least 2 times a year at no charge to you. You must pay for any alterations)**

# Agreement for the Use of School-Owned Instrument and Equipment

**2009-2010**

*(Please Print)*

Student Name \_\_\_\_\_

Instrument \_\_\_\_\_

Serial number \_\_\_\_\_

GISD number \_\_\_\_\_

Student and parent agree to the following:

- pay a \$25 yearly maintenance fee.

**We do not wish to pay the \$25 fee and will be responsible for all repair work in addition to the statements below.** (sign) \_\_\_\_\_

- return the instrument, with all parts, in the same condition, considering normal usage.
- take personal responsibility for the instrument at school, at home, performance locations, or any other location
- pay for all damages that may incur
- return the instrument before the end of the school year, or when the director requests
- replace the instrument with one of equal value, if it is lost, stolen, or damaged beyond repair
- may not allow any other person to use the instrument

Student signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Director approval \_\_\_\_\_ Date \_\_\_\_\_

Fee paid \_\_\_\_\_ check # \_\_\_\_\_

**Instrument return**

Date \_\_\_\_\_ Damage/ Fine estimate \_\_\_\_\_

Director \_\_\_\_\_