

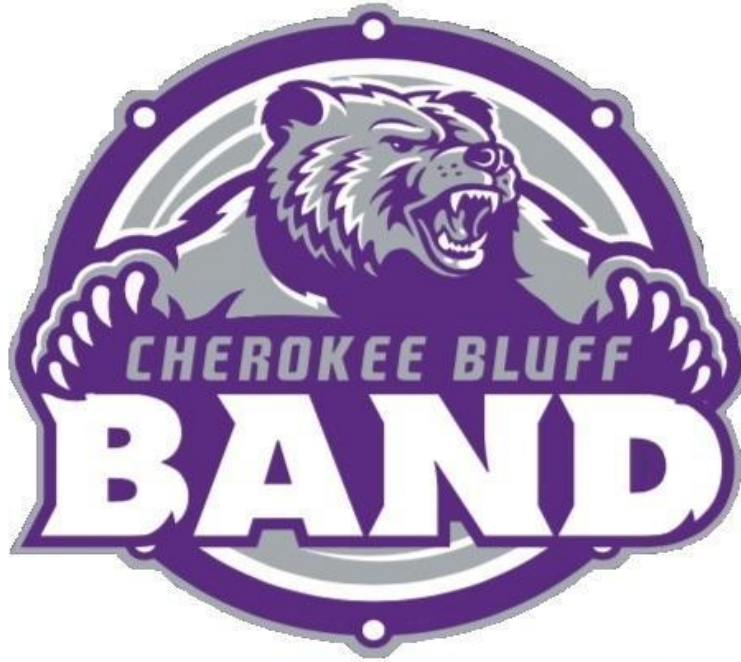
Student Name:

Instrument:

Grade:

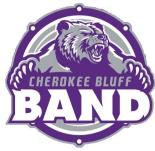
New/Returning

# CHEROKEE BLUFF BAND PROGRAM



## High School Registration Forms 2020-2021

Please sign and return the following registration forms. If you have more than one student, please complete one set of forms for each student. All members-*returning and new*-must register each year.



## Cherokee Bluff High School Band Registration

Student Information			
Student Name:		Student ID#:	
Age:	Grade:	Date of Birth:	M/F:
Student Email:		Student Cell#:	
Student lives with:			
Student mailing address:			
Parent Guardian Information		<i>If there is a Custody Order in place, please provide.</i>	
Mother Name:			
Address:			
Mother Cell#:		Mother Work#:	
Mother Email:			
Father Name:			
Address:			
Father Cell#:		Father Work#:	
Father Email:			
Guardian Name:			
Address:			
Guardian Cell#:		Guardian Work#:	
Guardian Email:			



## 2020 – 2021 CBHS Band Contract and Understanding

**Student Name:** \_\_\_\_\_

**Instrument (or Guard/Majorette):** \_\_\_\_\_

**Grade for 2020-2021 School Year:** \_\_\_\_\_

**Full Performance: Marching Band Participant (Fall Semester):**

1. By signing below, I attest that I have visited [www.cherokeebluffband.com](http://www.cherokeebluffband.com) and have read the CBHS Band Handbook and agree to abide by the policies outlined. In addition to the handbook, I have viewed the CBHS Band Website and agree to the information contained therein pertaining to student and parent involvement in the CBHS Band.
2. I understand that I will be expected to attend all rehearsals and performances.

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

**Full Performance: Non-Marching Band /Concert Band Only Participant (Fall Semester):**

**Fall Sport (CBHS Sponsored Only) \_\_\_\_\_**

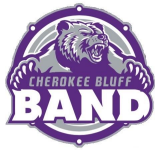
1. By signing below, I attest that I have visited [www.cherokeebluffband.com](http://www.cherokeebluffband.com) and have read the CBHS Band Handbook and agree to abide by the policies outlined. In addition to the handbook, I have viewed the CBHS Band Website and agree to the information contained therein.
2. I realize that if I quit the school sponsored Fall activity (Football, Cheerleading, Softball, Volleyball, or Cross Country) or do not make the team, I will be expected to attend all marching band rehearsal and performance dates.

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

**Parent Contract:**

1. By signing below, I attest that I have visited [www.cherokeebluffband.com](http://www.cherokeebluffband.com) and read through the CBHS Band Handbook and I agree to support the band, band directors, staff, and band parent association.
2. I agree that I will not allow my child to change his/her mind and break this contract.
3. I agree to abide by all band expectations, never asking for exceptions.

Parent /Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## Medical Information

General Medical Information	
Student Name:	
Does the student have chronic health problems? If any, please list.	
Is the student allergic to any medicines?	
Please list all allergies (if applicable) including foods and environmental:	
Does student have asthma?	
Does student carry an EpiPen or inhaler?	
Please list medications taken on a regular basis.	
What is the date of the student's last tetanus shot?	
Please list any additional pertinent information :	
Physician Information*	
Name/Practice/Address:	
Phone::	
<b>*If there is an incident warranting a hospital visit, we will take them to the nearest hospital available.</b>	



## Parent Permissions, Waivers and Releases

*\*All Information provided on this form is private and confidential and will only be used when necessary.*

### Parent Permissions\*

Please **CIRCLE** any OTC medications that can be provided to your student:

Tylenol	Sudafed	Benadryl Tablets	Maalox
Ibuprofen	Dramamine	Benadryl Cream	Neosporin

In case of minor illness, the Cherokee Bluff Band Directors or chaperones of the Band Association have my permission to administer the above over the counter drugs to my son/daughter.    **YES**            **NO**

I \_\_\_\_\_ certify by my signature that my child, \_\_\_\_\_, is covered by my personal or group medical insurance policy, and I decline the insurance provided by the school. I further certify that I am aware that I may purchase medical insurance for my student through the school.

Parent | Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

### Emergency Waiver and Medical Consent

TO WHOM IT MAY CONCERN, I, the undersigned parent | guardian of:

\_\_\_\_\_

Full Name of Student

\_\_\_\_\_

Date

Herby grant authorization to a Band Director or any chaperone of the Cherokee Bluff Band Association standing in loco parentis, to obtain any emergency medical and/or surgical procedures from a physician or hospital emergency room physician on behalf of the above-named minor.

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

Parent's Printed Name \_\_\_\_\_

### Emergency Contact and Insurance Information

Student Name:

Gender:

DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Parent Name:

Phone#:

Emergency Contact:

Phone#

Insurance Carrier:

Policy #

***Please provide a copy of the insurance card, front and back.***



## High School Acknowledgements and Release Forms

Student Name: _____	Student ID#: _____
---------------------	--------------------

### Cherokee Bluff Band Student and Parent Handbook Acknowledgement

I have read and understand the contents of the 2020-2021 Student and Parent Handbook. I understand that information is posted on the band website [www.cherokeebuffband.com](http://www.cherokeebuffband.com) and emails are sent as a *REMINDER* not as a "last minute" notice.

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

Parent|Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Name, Photography, & Video Release Acknowledgement of Cherokee Bluff High School

**Yes No** I give permission for my child's full name to be used as indicated in the 2020-2021 Student & Parent Handbook.

**Yes No** I give permission for my child's photo to be used as indicated in the 2020-2021 Student and Parent Handbook.

**Yes No** I give permission for my child's likeness to appear in video materials to be used as indicated in the 2020-2021 Student and Parent Handbook.

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

Parent|Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Hall County Board of Education Release Acknowledgement

School functions and trips for the 2020-2021 school year include away football games, away competitions, LGPE festivals, concert, trips.

**I, \_\_\_\_\_, the Parent|Guardian of child, \_\_\_\_\_, hereby consent to my child's participation in the school trips listed above.**

I further acknowledge and agree to the following:

- The Hall County Board of Education, Its members, employees, and agents assume no responsibility for personal injuries and/or property damage which might be suffered by my child, his property, or the person or property of others during saif function/trip, and hereby expressly release said Board of Education, its members, employees, and agents from any and all liability relating to such injuries of damages.
- The Hall County Board of Education's policies on Student Conduct and Discipline shall be in full force and effect as to all student participants in this function/trip at all times during the same, and any violation of any rules contained therein by my child may result in appropriate disciplinary measures includes suspension and expulsion as provided in said policies.
- The Hall County Board of Education, its members, employees, and agents are not responsible for any expenses related to this school function/trip except as otherwise specifically agreed to them in writing.
- The Hall County Board of Education may require as a condition of my child's participation in this school function/trip that satisfactory evidence be submitted indicating that my child has sufficient medical insurance in effect during the period of the said function/trip.

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

Parent|Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## Uniform Order Sheet

Student Name:	Student ID#:
---------------	--------------

### High School Classroom Performance Groups\*

Percussion	Uniform based on Performance Band for both boys and girls.	Cost based on Performance Band
Concert Band	Boys: Black collared shirt. Black Slacks. Black socks. Black shoes.	Self-purchased
	Girls: Black dress or Black skirt and black blouse. Black shoes.	Self-purchased
Symphonic Band	Boys: Black collared shirt. Black Slacks. Black socks. Black shoes.	Self-purchased
	Girls: Black dress or Black skirt and black blouse. Black shoes.	Self-purchased

*\*Each vendor will have scheduled times on campus for fitting tuxedos and dresses.*

### Marching Band (Winds and Percussion Students)

Item	XS	S	M	L	XL	2X	3X	Price	Total Qty	Total Due
Dri-Fit Shirt								<i>*included*</i>		
Show Shirt								<i>*included*</i>		
Gloves								<i>*included*</i>		
Marching Band Cap								<i>*included*</i>		
Marching Band Shoes	Shoe Size:							<i>*included*</i>		
Extra Dri-Fit Shirt								\$15.00		
Extra Show Shirt								\$15.00		
								\$20.00		
								\$10.00		
Extra Band Cap								\$25.00		
Extra Gloves								\$4.00		
Football Pre-Game Meals	Game days are busy for everyone. As a safeguard for the kids, we provide them a free pre-game meal.									
<b>TOTALS:</b>										

### Color Guard

Item	XS	S	M	L	XL	2X	3X	Price	Total Qty	Total Due
Uniform (Spirit)	To Be Sized Upon Acceptance							<i>*included*</i>		
Uniform (Competition)	To Be Sized Upon Acceptance							\$130.00		
Shoes	Shoe Size:							<i>*included*</i>		
Warm-Ups	To Be Sized Upon Acceptance							\$90.00		
Flag Bag								<i>*included*</i>		
Book Bag								\$50.00		
Football Pre-Game Meals	Game days are busy for everyone. As a safeguard for the kids, we provide them a free pre-game meal.									
<b>TOTALS:</b>										



## High School Membership Fees

### High School Band Membership Fees

The Cherokee Bluff Band Membership Fees payment schedule below is the payment plan breaking the yearly fees into easy payments. Members are responsible for all fees, *in full*, regardless of the date member joins.

**IT IS VERY IMPORTANT THESE PAYMENTS ARE MET ON TIME!**

We cannot order what your child needs to participate unless we have funds available.

### Concert Band Payment Schedule

September 1, 2020	\$50
-------------------	------

### Marching Band (Winds/Percussion) Payment Schedule

April 21, 2020	\$200 Deposit
April 21, 2020 (select students)	\$100 School-Owned Maintenance/Cleaning Fee
July 20, 2020	\$200 Marching Band Uniform Costs, Meals, and Shoes
August 11, 2020	\$135 Payment

### Color Guard Payment Schedule

April 21, 2020	\$200 Deposit
May 7, 2020	\$270 Uniform Fees (uniforms are purchased by each student, discounts will apply for veteran Color Guard members)
July 20, 2020	\$200 Band Camp Fee
August 11, 2020	\$135 Payment

### Sibling Discount

**Apply Discount:    Yes    No**

Do you have a sibling in Marching Band or Color Guard? If so, you qualify for \$50.00 off your membership dues.

Name of registrant: \_\_\_\_\_

Name/Grade of sibling: \_\_\_\_\_

### Policy Agreement

It takes a large amount of money to meet the operational expenses of the band program. Cherokee Bluff Band Association provides members with professional instruction, instruments, and uniforms.

Members/Parents that are unable to meet their financial obligation to the organization are required to make arrangements with CBBA for assistance in meeting their financial obligations. These arrangements are to be made in the in the first month of which an installment cannot be paid. If you need assistance, or need to make arrangements to pay scheduled fees on time, please contact the CBBA treasurer at [treasurer@cherokeebluffband.com](mailto:treasurer@cherokeebluffband.com).

**I, THE PARENT|GUARDIAN OF MEMBER, \_\_\_\_\_, UNDERSTAND AND AGREE TO THE DUES POLICY STATED ABOVE.**

Parent|Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_





## Band Participation Agreements

Student Full Name: \_\_\_\_\_

Student Id#: \_\_\_\_\_

### Band Participation and Financial Agreement

I agree to meet the time and monetary commitments for the Cherokee Bluff Band Program for 2019-2020 as outlined in the CBHS Band Handbook and understand that all program fees and payments are non-refundable.

Student Signature: \_\_\_\_\_

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

Parent|Guardian Signature: \_\_\_\_\_

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

**Marching Band Minimum Deposit Due April 21, 2020 | \$200.00**

### Marching Band Uniform Use and Maintenance Agreement

I agree to comply with the Uniform Use and Maintenance Agreement as outline in the CBHS Band Handbook.

Student Signature: \_\_\_\_\_

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

Parent|Guardian Signature: \_\_\_\_\_

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

### School Instrument Usage Agreement

I hereby request use of the instrument indicated below for the 2020-2021 school year. I agree to be responsible for any damage or loss that may occur while in my care, including mallet breakage/reed/mouthpiece replacement needs and shall pay the cost of repair or replacement upon request of the band director. Normal "wear and tear" will be covered by the school. Rental instruments must be returned at the end of the school year or earlier if the student ceases participation in the band program.

INSTRUMENT: \_\_\_\_\_

Student Signature: \_\_\_\_\_

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

Parent|Guardian Signature: \_\_\_\_\_

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