

HDMS Band Contract

HDMS Band Contract – 2015 ~ 2016 School Year

Student Name

By signing this contract, I understand that I commit to the HDMS Band class for the 2015~2016 school year. I acknowledge my responsibility to attend all the performances. In the case of illness or family emergency, I will have my parent(s) notify the school.

I will do my best to make music of the highest quality, demonstrate a positive attitude, and treat others with respect.

Student Signature _____

Date _____

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Parent Name

I fully support my child's excitement about music, and understand the terms and conditions detailed in this contract. I have also noted the performance dates on my calendar for the year and understand that my child has a responsibility to the band to attend and perform. I will do my best to assist my child in obtaining any materials that would be helpful to his/her musical experience. I will also keep up the maintenance on my child's instrument to ensure it is of proper quality. If I have any questions, I know that I may contact Bob Lehmenkuler, 464-1120, blehmenkuler@hdsd.k12.nh.us.

Parent Signature _____

Date _____

Best e-mail address _____

Best phone # _____

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Parents, please check your choices in the statements below.

____ Willing to volunteer to supervise at concerts

____ Willing to be considered as a chaperone for band trips

____ Want more information on signing my child up for after school lessons

____ Instrument he/she would like lessons on: _____

____ Want to be contacted for significant changes in my child's attitude