

2017-18 Student Information Sheet

Please print legibly. Return to Mr. Blankenship by September 8, 2017

Student:

Name	
Home Street Address	
City, State, Zip	
Home/Cell Phone	
2017-18 Grade Level	
Student e-mail	
Instrument	

Parent Information:

Mother's Name:	Father's Name:
Work Phone	Work Phone
Cell Phone	Cell Phone
E-mail	E-mail
Home Phone	Home Phone

Emergency Contact (if parents cannot be reached):

Name:	Relationship to Student:
Phone:	

If applicable, parents/guardians living separately from the above student who wish to receive information:

Name:	
Street Address	
City, State, Zip	
Phone Number(s)	
Relationship to Student:	
E-mail	

This information is for emergency purposes and goes with the orchestra when they travel.

Consent/Agreement Forms

Please read, sign and return to Mr. Blankenship by September 8, 2017

PART 1 - Freeman Orchestra Handbook Student/Parent Responsibility Agreement

I have read and understand the Student Responsibilities and Policies as stated in the 2017-2018 Freeman Orchestra Handbook. I understand these policies are non-negotiable and are necessary for participation in the Douglas S. Freeman Orchestra program.

Signature of student

date

Signature of parent

date

PART 2 – Consent for School Field Trips

I, the undersigned parent/guardian of _____ hereby authorize him/her to make trips to practices, festivals, competitions, performances and other field trips with the orchestra at Douglas S. Freeman High School. I understand that these trips will normally be by school bus or school activity bus, but for distant trips, the orchestra will use charter buses. I agree not to hold Henrico County, Douglas S. Freeman High School, or their personnel responsible in the event of an accident. I also understand that participation in field trips may require early dismissal from school, including classes other than orchestra, and it is the student's responsibility to make up all missed work.

Signature of student

date

Signature of parent

date