

Douglas S. Freeman Bands

Douglas Southall Freeman High School - 8701 Three Chopt Road – Henrico, VA 23229
www.freemanband.org – (804)673-3700

DATE: November 11, 2015
TO: Parents of Band and Strings Students
SUBJECT: 2016 Spring Trip

Each spring, the Freeman Band, Strings and Chorus Departments take an extended overnight trip. The purpose of this trip is to compete with and observe other musical performers from all over the country.

This year we are excited about going to New York City on April 21- 23, 2016. Buses will depart early morning April 21 and return in the late evening on April 23. We are looking forward to the competition as well as touring the Big Apple, seeing a Broadway Musical, and attending the awards ceremony on a Hudson River Breakfast Cruise!

The trip will cost approximately \$550 per student but we will not know the final cost until early December. This cost covers transportation, hotel rooms, meals, competition fees and recreational activities. All music department students are encouraged and welcome to participate in the Spring Trip.

Each student planning to attend the spring trip is required to pay a non-refundable deposit of \$150 by December 1, 2015. You must also return the second page of this letter with that payment.

A letter will be sent out in early December with the final cost. Your student's balance owed will be noted in that letter. The remaining balance can be paid in full at that time or in installments:

January 12th \$125 (estimate)
February 10th \$125 (estimate)
March 4th \$150 (estimate)

Again, the \$550 is a starting estimate and is subject to change. All payments must be paid in full by March 4, 2016 and the deposit is non-refundable.

If you have questions, please contact the Band Boosters at DSFBAND1@GMAIL.COM.

Thanks and we look forward to a great trip!

Freeman Band and Strings 2016 Spring Trip Registration Form

Check and form due date: December 1, 2015

Checks payable to: DSF BAND BOOSTERS (NO CASH ACCEPTED)

Completed form and check can be given to Mr. Blankenship or mailed to:

DSF Band Boosters/Julie Black/7005 Lakewood Drive/Richmond, VA 23229

Student Name: _____

Address: _____

Parent Name: _____

Parent email: _____

Parent Phone Number: _____

Deposit (**NON-REFUNDABLE**) \$150.00 _____

Please let us know if you are interested in being a chaperone Yes___ No___

Name of Chaperone: _____

Phone number of Chaperone: _____

Email of Chaperone: _____