2019-20 Student Information Sheet

Please print legibly. Return to Mr. Blankenship by September 9, 2019

Student:

Name	
Home Street Address	
City, State, Zip	
Home/Cell Phone	
2019-20 Grade Level	
Student e-mail	
Instrument	

Parent Information:

Parent/Guardian #1 Name:	Parent/Guardian #2 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 9, 2019

PART 1 - Freeman Orchestra Handbook Student/Parent Responsibility Agreement

I have read and understand the Student Responsibilities and Policies as stated in the 2019-2020 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