

Name: _____

Class Period **2 3 4 5 6 7**
(Circle one)

SPRING HS CHOIR FORMS PACKET and FEE INFORMATION

Due Date: Friday, August 25th

(The Choir Forms packet is a major grade.)

Parents and students, please read all information included in this packet thoroughly, fill out each form completely, sign (student AND parent) and return this packet with your \$50 choir fee (place the fee in the attached envelope and seal it) by **Friday, August 25th**. Don't be late! Points will be deducted for turning in the forms packet late.

**The \$50 Choir Fee IS NOT part of the major grade.

All policies and forms referenced in this packet are available for parents to view/download at our website (www.springchoir.com). If you do not have internet access and/or you would like a hard copy of the choir handbook, please let a choir director know and we will be happy to send one home

HOW TO TURN IN THIS PACKET AND MONEY!!!

Choir fees, choir shirt money, trip payments, etc. can only be paid with **CASH, MONEY ORDER OR CREDIT CARD**. Once you are in our Charms system, you should make CC payments directly in Charms.
(SHS Choir never accepts checks.)

If paying with **CASH or MONEY ORDER** complete the attached envelope, place payment inside and seal the envelope.

Do not remove or detach any pages of this packet or the envelope.

If paying online using Charms/Cash App, please write on the front of the envelope "PAID \$____ IN CHARMS/CASH APP". Make sure the student's name is on the envelope.

** Money concerns should be directed to your student's director by email or telephone directly from the parent/guardian on or before the due date. Verbal messages sent with a student will not be returned.*

SPRING HS CHOIR FEES

PLEASE READ: Choir Student fees for the 2023-2024 school year cover uniform hemming, repair and cleaning of the uniform (at the end of the year), supplies, music, and a choir shirt. As per the Spring ISD Program of Studies, all choir students must pay the appropriate choir fee in order to participate in choir. Choir shirts are worn throughout the school year on designated days and for various activities. Shirts are available in the choir room and will be delivered to your student during their choir class period.

PART 1: ALL STUDENTS COMPLETE THIS PART

_____ **Class Period:** 2 3 4 5 6 7
Student Last Name **First Name** (circle one)

CHOIR FEE – Mandatory for ALL CHOIR STUDENTS – \$50.00 = _____

Student T-Shirt Size (unisex): S M L XL XXL XXXL
(Please circle a size for the Student - required and included in fee—Adult sizes only)

District Audition Fee (REQUIRED ONLY if auditioning for district, including **ALL** Chamber Choir members) \$20.00 = _____

Chamber Choir Shirt (REQUIRED ONLY for **NEW** Chamber Choir members) \$25.00 = _____

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PART 2: Complete **ONLY** if you want to order additional items for yourself, parent, sibling, etc...

THESE ADDITIONAL ITEMS MUST BE PAID FOR BEFOREHAND OR THEY WON'T BE ORDERED.

Spring Choir T-Shirt S M L XL XXL _____ x \$15.00 = \$ _____
(circle size(s) for additional shirt(s))

Spring Choir Baseball Cap _____ x \$20.00 = \$ _____
Black sport mesh cap with an embroidered patch (original Spring Choir logo)

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TOTAL PAID: \$ _____

PAYMENT OPTIONS:

CASH OR MONEY ORDER: Fill out an envelope and drop in the Choir safe Remember: WE CANNOT ACCEPT CHECKS.

PAYING ONLINE: Go to charmsoffice.com & click on "Login". Click on "Parents/Students/Members."
School Code: springchoir Student Area Passcode: your Student ID# (NO letters)
If you can't remember your password you will have to reset it yourself. **Please remember that there is a \$5 Paypal fee to pay online.

CASH APP: [springhschoir](https://springhschoir.com) (put student's first and last name on the memo line)

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If you are having trouble paying the Choir Fee online through CHARMS, please email shicks1@springisd.org AND jmelanco@springisd.org for assistance.

Spring Independent School District High School Choir

Constitution & Code of Ethics Signature Page

Participation in the Spring ISD high school choir is a privilege, and not a right. In order for the high school choir member to maintain and retain this privilege, the policies and procedures contained in the constitution must be adhered to in the spirit of discipline, education, and the overall goals and objectives of Spring ISD.

The policies and enforcement procedures are relative to the Spring ISD high school choir program and will be administered accordingly. The rules, regulations, and policies are outlined in the Spring ISD high school choir Constitution and Code of Ethics.

I have read the Spring ISD Choir Team Constitution and Code of Ethics in its entirety and fully understand the time, expense, and discipline that will be required of me as a choir member. I agree to abide by all provisions of the High school Choir Constitution and Code of Ethics.

Student Signature

Date

I have read the Spring ISD High School Choir Constitution and Code of Ethics in its entirety and fully understand the time, expense, and discipline membership in the Choir Team will be required for my singer. I support my singer in this endeavor.

Parent/ Guardian's Signature

Date

You can access the SHS Choir Handbook online with the barcode on the last page of this packet.

PARENT AND STUDENT ACKNOWLEDGEMENT FORM & CONTRACT

Please read all of the following carefully and then sign below.

Guidelines:

We understand the expectations, grading, attendance, and eligibility policies required for being a member of the SHS choir department as outlined by the choir directors. As the student, I understand what is expected of me as a member of the SHS Choir Dept and agree to maintain the tradition of high musical standards. As a parent, I understand what is expected of my student and will help him/her follow the guidelines as outlined. We understand that failure to follow these guidelines may result in probation or the student's dismissal from the organization. We understand that successful organizations require teamwork between school (teachers), students and parents.

Uniform–Cost of Replacement:

We understand that the choir fee must be paid before a uniform will be issued, this will help cover hemming and minor repairs and dry cleaning at the end of the year. We will be responsible for the up-keep and return of the choir uniform. We understand that the **replacement** cost of the uniform is as follows and we agree to make any financial restitution, if required.

Concert Women, Bella Voce, and A Cappella Women:	\$80.00
Concert Men:	\$120.00
Chorale Men:	\$140.00
Chorale Women:	\$80.00 (dress replacement) \$15.00 (jewelry replacement)

We understand that in order for students to clear their records and have no holds before graduation, we are responsible for having the dress/tux returned with the student's name on it and in good condition by the due date at the end of the year as determined by the directors.

Fundraising – Please check one:

Yes, my student will fundraise with post-paid products. **No, my student will NOT fundraise with post-paid products.**

If we check yes above, we agree to all of the rules regarding fund-raising for the Spring High School choral department. We will meet deadlines for order forms, collecting money, and returning money in **cash or money order** to clear our records. If we fail to return money owed, a hold will be placed on our students' account that will impact whether or not they can walk at graduation. We understand that we are financially responsible for all fundraisers that we participate in and that if we do not meet payment deadlines, we may forfeit the opportunity to participate in the trips/activities by the choir and further fund-raising opportunities. Finally, we understand that **fund-raising is NOT a requirement to be in choir.**

Field Trip Authorization Form:

We understand that choir students complete one authorization form for the year which covers all approved choir activities as listed on the approved choir calendar of events. This form (Form E) is provided in this packet. We understand that parents/guardians of Spring HS choir students reserve the right to amend or revoke this form at any time by providing a written request to the Spring HS choir staff.

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We have read, completed, and understand all of the information listed on both sides of this form. We understand that we may update this form at any time by requesting that the old form be revoked in writing and completing a new agreement form.

Please Print: _____ **Class Period: 2 3 4 5 6 7**
Student Last Name First Name (Circle one)

Please Sign:

Student Signature _____

Date _____

Parent Signature _____

Date _____

STUDENT/PARENT CONTACT INFORMATION

****Print clearly/neatly and fill in EVERY blank.**

Student Information:

Class Period: 2 3 4 5 6 7
(Circle one)

Name _____ Student ID #: _____
Last First

Mailing Address _____

City _____ State TX Zip Code _____

Student Cell Phone _____ Birthday _____
(ex: 1/1/1996)

Student School Email _____

Parent/Guardian Information:

1. Parent/Guardian Name _____

Best Phone Contact _____ Home Work Cell

Alternate Phone Number _____ Home Work Cell

**Parent Email: _____

2. Parent/Guardian Name _____

Best Phone Contact _____ Home Work Cell

Alternate Phone Number _____ Home Work Cell

**Parent Email: _____

PARENTS:

In an effort to provide the most effective director-to-parent communication, please make sure you always have CURRENT CONTACT INFO on file with the SHS front office, so you can receive these messages. These messages will always be choir-related. PLEASE make sure you listen to these

messages! Additionally, we have our own text messaging system that we use a few times per semester. Those messages will also be only choir-related only.

MEDICAL RELEASE FORM

****Print clearly/neatly and fill in EVERY blank. Write "N/A" in the blanks for which you have no info.****

Name _____
Last First

Student ID #: _____

Class Period: 1 2 3 4 5 6
(Circle one)

Home Address _____

City _____

Student Cell _____

Name of Parent or Guardian _____

Parent Cell _____

Work Phone # _____

Person to contact in case of an emergency _____

Phone # _____

Name of Insurance Company _____

Policy # _____

Name of Physician _____

Phone # _____

The parents or guardian of each student attending school related events hereby grants the sponsor or other persons in charge permission to obtain medical help, if needed, and release the school and sponsor from liability for any occurrence in relation to said activities.

Signature of Student _____

Date _____

Signature of Parent or Guardian _____

Date _____

*** List any prescription medications and dosage which you are required to take on a DAILY BASIS:

1. _____

2. _____

3. _____

4. _____