**Roosevelt High School Symphonic Band**

**Pacific Northwest Band Festival Permission Form**

**Festival Date: February 10, 2015**

**Please return a signed copy to the Band Mailbox in the RHS Band room by 2/9/15!**

**This is a school sponsored field trip-all school and school district rules are in effect.**

**Student Section** - Students initial all three items and sign below:

\_\_\_\_ I will not have any involvement with illegal substances, alcohol or other inappropriate or illegal activity. I understand that this involvement will result in suspension from school, enrollment in a drug assessment and/or education program and possible removal from the performing group.

\_\_\_\_ I will not harass or haze other students. I understand that any offending student may, at the discretion of the director, be sent home at the family’s expense.

\_\_\_ I will follow the directions of Mr. Brown and the volunteer parent chaperones at all times.

**I have read and understand the information on this form.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student signature Print Name Date**

**Parent Section**

I give my Consent for Mr. Brown and designated trip chaperones to supervise my student, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, throughout the trip.

I give my permission for my student to travel to the University of Washington, Meany Hall.

**Medical Release:** I authorize and consent to medical, surgical, hospital care and procedures to be deemed medically immediately necessary or advisable by the physician to safeguard my child’s health if I cannot be contacted. I waive my rights of informed consent to such treatment. I also authorize a copy of this consent form to be treated with the same authority as the original.

**I have read and understand the information on this form.**

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**Parent Signature Best contact phone number Date**