

*****With this form, you have 2 options:**

1. Fill this page out and return.
2. Log into www.charmsoffice.com
Enter "WesterMSBand" under Parent/Student Login
Enter your student's ID number for Student Password
Update/Enter information on the screen.
When completed, write "Updated on Charms" on this page and return.

Student's Name _____ **Band Class** _____

Address _____

City, State, Zip _____

Home Phone _____

Instrument _____ Locker Assignment _____ Combination _____

Private Teacher _____

Same address and phone information for _____ Mother _____ Father

Mother's Name _____

Address (if different) _____

City, State, Zip _____

Work Number _____ Cell Number _____

Email _____

Father's Name _____

Address (if different) _____

City, State, Zip _____

Work Number _____ Cell Number _____

Email _____

PARENT VOLUNTEER INFORMATION

Before volunteering, please complete the MISD Background Check. This can be found out:

https://mansfield.quickapp.pro/apply/applicant/start?_ref=eff2f70ca50d43279741a824007b83aeee92a7b885ad5c450166d3b556b14796

Please circle the activities in which you would like to participate:

Chaperone

Concert Decorating

Fundraising

Dance Decorating

Uniform Help

Any other area of need _____

HANDBOOK ACKNOWLEDGMENT FORM

**PLEASE SIGN, DETACH, AND RETURN THIS PAGE BY
September 15, 2017**

Band to which you are assigned: (circle one)

Honors Band

Symphonic Band

Concert Band

Beginner Class

We have read and understand the Wester Middle School Band Handbook.

I, _____, along with my parents understand
(please print)
what is expected of me and intend to abide by this handbook for the success of myself
and the organization in which I am a participant. I also understand that failure to abide
by the guidelines in this handbook may result in being placed in a non-performing
instrumental class.

Student Signature

Parent Signature

Date

**Wester Middle School Band
Medical Information and Release Form
2017-2018 School Year**

Fill in this form completely and return to the band office. Notify the band office as soon as possible if any changes need to be made to this information.

Student's Name _____

Address _____

City _____ Zip _____ Home Phone () _____

Mother's Name _____

Work Phone () _____ Cell Phone () _____

Father's Name _____

Work Phone () _____ Cell Phone () _____

Alternate Emergency Contact Name _____

Phone () _____

Family Doctor _____

Phone () _____

Student's Insurance _____

Policy Number _____

List any allergies the student has (including drug allergies)

List any medications that are being taken

List any conditions that may restrict physical activity

I do hereby give Nathan Wood and Christin Alkhazshvily, or their designees, the authority to seek medical attention for the above named student in the event of an emergency or in any situation that requires medical attention.

Parent/Guardian Signature _____

Date _____

**PARENT’S PERMISSION RELEASE AND INDEMNITY
FOR FIELD TRIPS**

I hereby certify that my son/daughter, _____, has my permission to participate in the field trips with the Wester Middle School Band during the 2017-2018 school year.

To the best of my knowledge he/she is physically fit to engage in such activity and is not suffering from any disease or injury. I agree and do hereby waive and release all claims against the Mansfield Independent School District and any teacher, employee or other person engaged in the activity in question and agree to hold them harmless from any and all liability relating to my son/daughter for any personal injury or illness that may be suffered or any loss of property that may occur.

I understand that reasonable measures will be taken to safeguard the health and safety of my son/daughter and that I will be notified in the case of an emergency. In the case of an accident or sickness, I authorize the calling of a doctor or the providing of other medical services.

It is understood that no child will be allowed to participate in any activity until this form is signed by his/her parent/guardian.

Signed at _____, Texas, this ____ day of _____, 2017.

Signature of Parent/Guardian _____

Phone Numbers _____

WESTER MIDDLE SCHOOL BAND UNIFORM ORDER FORM

Student Name _____

Band Class _____

Informal Band Uniform (Wester Band Shirt)

T-Shirt Size Needed (Adult Sizes):

_____S _____M _____L _____XL _____XXL

(Additional \$3 fee required)

This is the time to order additional shirts for parents and family members! A limited number of extra shirts will be ordered, so get yours now.

Formal Band Uniform (Tuxedo Shirt and Black Bowtie)

(If you already have one and it still fits, there is no need to order another.)

_____ Yes, I need a tuxedo shirt and bowtie.

_____ No, I already have a tuxedo shirt or I will purchase one on my own.

_____ I have a tuxedo shirt and need to purchase black bowtie.

Measurements will be taken during class time.

Band T-Shirt	\$15 or \$_____ (if ordering more than one)
Tuxedo Shirt/Bowtie	\$20 (if needed)
Bowtie Only	\$5
Total Attached	\$_____

*****If paying by check, please make checks payable to Wester Band.**

FORM DUE 9/15/2017

**Mansfield Music Enrichment Program
Supplemental Music Instruction
Student Registration/Parental Permission**

- I wish for my child to participate in the Mansfield Music Enrichment Program (MMEP).
- I have received a copy of the MMEP Guidelines for Participation and agree to abide by all its conditions and policies. (in Band Handbook)
- I understand that the cost of instruction is \$18.00 per lesson payable monthly in **advance**.

Student _____ (Print name)

Parent/Guardian Signature: _____

Address: _____

City: _____

Zip: _____

Home Phone: _____

Work Phone: _____

Instrument(s)/Vocal: _____

School: _____

Band/Choir/Orchestra Director: _____

Please return this registration form to your child's band director as soon as possible.

To be completed by the Private Instructor

Private Instructor _____

School _____

Lesson day and time assigned _____

Director's approval signature _____