

# 2018-2019 SPIRIT OF JUPITER MARCHING BAND FORMS



This packet contains the forms required for participation in the Spirit of Jupiter Marching Band. **ALL FORMS ARE DUE ON Thursday, March 29, 2018.** The band room will be open that night until 8:00 pm so forms can be submitted.

Place **FORMS** in the grey metal drawer on the shelf immediately to the left of the band room entrance. **PAYMENTS** should be payable to "JHS Band" with the student's name in the memo and placed in the white Fair Share mailbox in the southwest corner of the band room, just outside near the tuba/uniform room.

**Complete all forms legibly in BLACK or BLUE ink; no other colors of ink, please.**

## DUE Thursday, March 29, 2018

- \$200 Fair Share Payment**  
Checks should be payable to "JHS Band." CASH is strongly discouraged, but if you must pay in cash, please get a receipt from a band treasurer.
- Spirit of Jupiter Financial Agreement**  
Acknowledges the financial commitment of joining the Spirit of Jupiter for the 2018-2019 season.
- Spirit of Jupiter Commitment Letter**  
Commits the student to participation in the Spirit of Jupiter for the full marching season, and acknowledges behavior and responsibilities expected as a member of the Spirit of Jupiter.
- Spirit of Jupiter Attendance Contract**  
Acknowledges understanding of attendance and grading policies to be followed by all Spirit of Jupiter members.
- Fair Share / Commitment / Attendance Notarization Form**  
Confirms the signing of the Financial Agreement, Commitment Letter, and Attendance Contract. Notary must see the signed documents before signing. These four forms must be received before a student can be assigned a position in the show.
- JHS Band Health Information and Authorization**  
**VERY IMPORTANT:** Allows immediate medical treatment to be administered to your child in your absence. If we do not have this form on file, your child must wait for a response from paramedics before receiving medical treatment. This form must be COMPLETED IN FULL EACH YEAR. It must be notarized in order to be considered "complete." *A notary will be available on Wednesday, March 28, 2018 at 6:30 pm for your convenience.*  
**Students cannot participate in band camp without this medical form on file with JHS Band.**
- Photo copy of the front and back of student's health insurance card**  
Attach to the Health Information and Authorization form (above).
- JHS Band Student Information Sheet - THIS FORM CAN BE COMPLETED ONLINE!**  
*Visit [JupiterBands.com/Forms](http://JupiterBands.com/Forms) and look for "JHS Band Contact Information Form 2018-2019 (online)."*
- Release and Consent for Student Information Publication** (editable PDF available at [JupiterBands.com/Forms](http://JupiterBands.com/Forms))  
Standard release required by the School District of Palm Beach County.
- Band Handbook Acknowledgement form** (editable PDF available at [JupiterBands.com/Forms](http://JupiterBands.com/Forms))  
Acknowledges both parent and student have read and agree with the handbook.
- Guard Equipment Contract** (for Color Guard members only)  
Acknowledges responsibility for care of band-owned guard equipment.

**Turn in all forms in the grey metal drawer just inside the band room doors!**

# Spirit of Jupiter Marching Band 2018-2019 Financial Agreement

***This form is DUE Thursday, March 29, 2018***



This form acknowledges your commitment to payment of the Spirit of Jupiter band fees (Fair Share and Overnight Travel) for the 2018-2019 school year.

**PARENTS:** Please initial at each line:

\_\_\_\_\_ ***I am obligated to fulfill my Fair Share and Overnight Travel fees even if I fail or choose not to complete the marching season or if I am dismissed with cause.***

\_\_\_\_\_ I will either raise the money through fundraisers or pay the amount from my own funds when due.

\_\_\_\_\_ **I understand that failure to pay band fees in full will cause my child to be placed on the school's obligation list. Failure to maintain an up-to-date account *may* cause my child to be placed on the school's obligation list.** Students on the obligation list cannot purchase a locker or parking pass, attend prom, or participate in senior activities, such as attending Grad Bash and graduation. Students with outstanding band fees are not permitted to attend the band banquet or receive band awards.

\_\_\_\_\_ I understand that my child may be assigned a shadow position if an account is not kept up-to-date.

\_\_\_\_\_ I understand that Overnight Travel fees must be paid prior to the overnight trips.

\_\_\_\_\_ I understand that payment in full is due October 29, 2018. If I choose to participate in the Christmas Tree Fundraiser, payment in full is due December 5, 2018.

\_\_\_\_\_ I understand that if our family cannot comply with the payment schedule listed in the Spirit Financial Statement that we must have a written payment plan in place with the Band Treasurer and approved by Mr. Gekoskie.

\_\_\_\_\_ I understand that our family is responsible for providing one adult volunteer to work one shift at the US Bands Florida Regional Show at Jupiter High School to be held on September 29, 2018 **AND** the Jupiter Festival of Bands to be held November 3, 2018.

\_\_\_\_\_ I understand that I can earn a Fair Share Credit by volunteering 30 hours for JHS Band activities, but that it is the volunteering parent/guardian's responsibility to sign in/out with the band event coordinator in order to receive credit for those volunteer hours.

\_\_\_\_\_ I understand that the entire Spirit Band program is dependent on the participation and support of instructors, students and parents and that my financial obligation is an integral part of that support.

\_\_\_\_\_ I understand that if I do not pay the Fair Share fee in full, my student might not be permitted to participate in future band co-curricular activities and/or hold a leadership position.

\_\_\_\_\_ I have read, understood, and accept the Spirit of Jupiter High School Band Budget for the 2018-2019 school year as listed on the Spirit of Jupiter Financial Statement.

By accepting and signing this Spirit of Jupiter Band Fair Share Financial agreement, I am responsible for the Fair Share payment of **\$1,375.00**, a maximum (without fundraising) Overnight Travel payment of **\$655.00**, plus any other applicable band fees.

\_\_\_\_\_  
Student Name (printed)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent Name (printed)

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

# Spirit of Jupiter Marching Band

## 2018-2019 Commitment Letter

***This form is DUE Thursday, March 29, 2018***



Dear Parent and Student, This letter is to ask for your word and bond of commitment to the Spirit of Jupiter Marching Band for the entirety of the 2018-2019 season. **STUDENTS: Please initial by each line.**

- I will adhere to all school and band rules and policies throughout the entire season.
- I will treat instructors, staff, leadership, volunteers, and each other with respect at all times.
- I will arrive early for each rehearsal and event in order to assist with set up and preparation.
- I will stay and assist with clean up after all practices and events.
- I will be responsible for my own equipment and care of that equipment.
- I will always be prepared and on time for each rehearsal.
- It is my responsibility to arrange for transportation to and from every rehearsal and event. Not having a ride is NOT an excused absence.
- I will arrange ahead of time so that jobs, doctors' appointments, vacations, sports practices, meetings, etc., do not interfere with the rehearsal or event schedule.
- I will attend ALL scheduled events and rehearsals. This is a team event in which all students are needed to perform.
- I will represent Jupiter High School and the Warrior Band proudly and professionally whenever attending an event or a rehearsal.
- I understand that when attending off-campus events I will abide by the buddy rule. I will be with another student at all times.

I understand that by *signing this letter* that I will be responsible for abiding by these codes throughout all sectionals, rehearsals, and events for the entire season. I understand that any non-conformity to these rules will result in consequences to be determined by the staff or director which also may result in dismissal from the group.

You are joining one of the best marching bands in the state of Florida. We are a hard working group and will rehearse a lot. In order to be the best we need to be **committed** to everything about the Spirit of Jupiter. This letter serves the purpose of your intentions in the marching band as we need to know final numbers to start writing drill. We cannot start the drill writing process until we have final numbers. Please know that once we have your commitment and drill writing has begun it is very costly to re-write drill due to breach of commitment.

Sign this letter stating that you acknowledge the information above and you are committing to the 2018-2019 Spirit of Jupiter Marching Band.

\_\_\_\_\_  
Student Name (printed)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent Name (printed)

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

# Spirit of Jupiter Marching Band

## 2018-2019 Attendance Contract

*This form is DUE Thursday, March 29, 2018*



In order for the Spirit of Jupiter to achieve the highest level of excellence, attendance at all rehearsals and performances is mandatory. It is important for students to be on time and ready to begin (instruments, music, equipment, and dressed appropriately) at the designated starting time. Any student not prepared to begin on time will be considered late.

Specific consequences for lateness, unexcused absences or inappropriate behavior will be set and enforced by the band director, staff, drum majors, or section leaders.

Absences that will be excused are:

- Illness (note from parent or doctor required)
- Death in the family
- Absent from school
- Emergency beyond the control of the student or parent

These absences must be reported five (5) days prior to absence to be excused:

- Observance of a religious holiday
- School-sponsored activity
- Required court appearance (documentation required)

All other absences are not excused. Please plan other appointments, work schedules, orientations, college courses, and engagements outside of rehearsal time. Please refer to the online band calendar, and be sure to plan well enough in advance to prevent any last minute conflicts.

**All students are expected to travel with the band to all competitions and on overnight trips.**

### Grading

Each student will receive 100 points for their daily participation grade for each rehearsal. Each unexcused absence will result in a 0 credit for the rehearsal. Each tardy will result in a 50 point deduction in the daily grade.

Any absence (excused or unexcused) may result in loss of eligibility to participate in the next performance and/or be placed in a shadow position. This is not necessarily a punishment but rather an issue of lack of preparation due to the absence.

### Communication

Use the Jupiter High School Band Report of Absence Form to communicate all absences. This form is available in your Band information packet, in the band room, and online at [JupiterBands.com/Forms](http://JupiterBands.com/Forms).

In the event of an emergency, please contact Director of Bands Andrew Gekoskie via email or phone if possible at [Andrew.Gekoskie@palmbeachschools.org](mailto:Andrew.Gekoskie@palmbeachschools.org) or 561-744-7921.

The student is also asked to contact his/her section leader to let them know as well.

By signing below, you understand the Spirit of Jupiter attendance policy and agree to abide by it. You are also stating that you understand the grading procedure.

\_\_\_\_\_  
Student Name (printed)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent Name (printed)

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**Spirit of Jupiter Marching Band**  
**Fair Share / Commitment / Attendance Notarization Form**  
***This form is DUE Thursday, March 29, 2018***



**READ THE FOLLOWING AGREEMENT CAREFULLY!**

**You ARE REQUIRED to have this form NOTARIZED before turning it in.**

**NOTARY: DO NOT SIGN UNLESS ALL SPACES BELOW HAVE BEEN FILLED OUT AND THESE FORMS HAVE BEEN SIGNED AND ATTACHED TO THIS NOTARIZED PAGE:**

Spirit of Jupiter Fair Share Agreement  
Spirit of Jupiter Commitment Letter  
Spirit of Jupiter Attendance Contract

By signing and having this form notarized, I hereby understand and acknowledge my financial responsibility and the commitment and attendance requirements for my child's participation in the Spirit of Jupiter Marching Band Program as stated in the Spirit of Jupiter Fair Share Agreement, Spirit of Jupiter Commitment Letter, and Spirit of Jupiter Attendance Contract for the 2018-2019 school year.

Name of student: \_\_\_\_\_

X \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Parent or Guardian

**STATE OF FLORIDA, COUNTY OF PALM BEACH**

The foregoing instrument was acknowledged before me this \_\_\_\_\_ by \_\_\_\_\_  
(Date) (Name of person acknowledging)

who is personally known to me or has produced \_\_\_\_\_ as identification and who did (did not) take an oath.  
(Type of identification)

\_\_\_\_\_  
(Signature of Notary Public) **NOTARY PUBLIC**

Commission No. \_\_\_\_\_

\_\_\_\_\_  
(Name of Notary typed, printed, or stamped)



**JUPITER HIGH SCHOOL BAND**  
**HEALTH INFORMATION AND AUTHORIZATION**  
**2018-2019 SCHOOL YEAR**

Students must turn in a complete, notarized health form BEFORE  
participating in any co-curricular band activity. One form per school year.

***PRINT legibly BLACK OR BLUE in ink. Fill in all blanks.***

**NOTARY: DO NOT NOTARIZE UNLESS THE ENTIRE FORM HAS BEEN COMPLETED**

**STUDENT INFORMATION**

FULL NAME					
	<i>Last Name</i>	<i>First Name (official)</i>	<i>M.I.</i>	<i>Nickname</i>	<i>M/F</i>
Home Phone:		Student Phone:			
Student E-mail Address:					
Student Number:		Birth Date (mm/dd/yyyy):			
Home Address:					
<i>Street Address</i>				<i>Apartment/Unit #</i>	
City, State ZIP:					

**PARENTS/GUARDIANS**

Student lives with (check ✓ one): <input type="checkbox"/> Both parents <input type="checkbox"/> Mother only <input type="checkbox"/> Father only <input type="checkbox"/> Guardian <input type="checkbox"/> Other:	
<b>Mother's Name:</b>	Mother's Email:
Mother's Home Phone:	Mother's Cell Phone:
Mother's Employer:	Mother's Work Phone:
<b>Father's Name:</b>	Father's Email:
Father's Home Phone:	Father's Cell Phone:
Father's Employer:	Father's Work Phone:
<b>Name of Preferred EMERGENCY Contact (other than parents):</b>	
Primary Phone:	Alternate Phone:
Relationship to Student:	

**★★ MEDICAL INFORMATION - FILL OUT COMPLETELY ★★**

<b>PRIMARY DOCTOR'S NAME:</b>	Year of Last Tetanus Shot:	
Doctor's Phone:	Hospital Preference:	
<b><u>Current Prescription &amp; Over the Counter MEDICATIONS</u></b> <b><u>AND dosage (Notify us if there are ANY changes)</u></b>	<b><u>ALLERGIES</u></b> <b><u>(foods, meds, etc.)</u></b>	<b><u>MEDICAL CONDITIONS</u></b>
<input type="checkbox"/> Check (✓) if none	<input type="checkbox"/> Check (✓) if none known	<input type="checkbox"/> Check (✓) if none known
	<input type="checkbox"/> Penicillin	<input type="checkbox"/> Asthma
	<input type="checkbox"/> Cephalosporin	

**JUPITER HIGH SCHOOL BAND**  
**HEALTH INFORMATION AND AUTHORIZATION**

Student's Name: \_\_\_\_\_

**★★ HEALTH INSURANCE INFORMATION ★★**  
**FILL OUT COMPLETELY**

<input type="checkbox"/> Check (✓) if My child is <b>NOT</b> covered by insurance	
Name of Policy Holder:	Policy Holder Relationship to Student:
Insurance Company:	Customer Service Phone:
Insurance Address:	City/State/ZIP:
ID #:	Group #:

**★★ AUTHORIZATIONS AND PERMISSIONS ★★**  
**FILL OUT COMPLETELY**

Check (✓) I hereby **PERMIT** my child, \_\_\_\_\_, to participate in ALL band-related activities.  
*Name of child*

**SPECIFY ANY PROHIBITED ACTIVITIES:** \_\_\_\_\_

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I hereby authorize a representative of the JHS Band to give the following over the counter medications to my child,  
 \_\_\_\_\_, if **necessary**:  
*Name of child*

Check (✓) the ones you **ALLOW**:

<input type="checkbox"/> Ibuprofen (Advil, Motrin)	<input type="checkbox"/> Aspirin	<input type="checkbox"/> Midol
<input type="checkbox"/> Acetaminophen (Tylenol)	<input type="checkbox"/> Benedryl	<input type="checkbox"/> Pamprin
<input type="checkbox"/> Naproxen (Aleve)	<input type="checkbox"/> Cortisone (Ointment)	<input type="checkbox"/> Pepto-Bismol

Specify any **PROHIBITED** over the counter medications: \_\_\_\_\_

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Check (✓) I **AUTHORIZE** an adult representative of the JHS Band to treat my child's minor illnesses with common remedies, such as Band-Aids, ice, heat, aloe, throat lozenge, antacid, etc.  
**If this is not checked, no one but your child's parent or guardian can do anything of this nature.**

**LIST ANY LIMITATIONS ON TREATMENT (TREATMENT WHICH YOU WILL NOT ALLOW):**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

★ ★ ★ ★ ★ ★  
**VERY IMPORTANT:**  
**THE NEXT PAGE MUST BE NOTARIZED**  
**FOR THIS FORM TO BE COMPLETE**  
 ★ ★ ★ ★ ★ ★

**JUPITER HIGH SCHOOL BAND  
HEALTH INFORMATION AND AUTHORIZATION**

Student's Name: \_\_\_\_\_

**Read the following agreement carefully.  
You ARE REQUIRED to have this form NOTARIZED before turning it in.**

**PERMISSION FOR PARTICIPATION AND TREATMENT  
in the JUPITER HIGH SCHOOL BAND PROGRAM in 2018-2019**

**This form MUST BE NOTARIZED.**

**NOTARY: DO NOT SIGN UNLESS ALL SPACES BELOW HAVE BEEN FILLED OUT  
AND ALL THREE PAGES OF THE FORM ARE ATTACHED.**

I hereby attest that the health history and information provided herein are correct and complete to the best of my knowledge, and that my child, \_\_\_\_\_, has permission to engage in all Jupiter High School band sponsored activities unless otherwise noted by me in this section, including, but not limited to, practices, performances and travel.

I hereby authorize an adult representative of the JHS Band to secure proper treatment as determined by a physician, in case of emergency, for my above-named child.

I also authorize a physician or hospital selected by an adult representative of the JHS Band, in case of emergency, to provide proper treatment including, but not limited to, hospitalization, injections, anesthesia, surgery, and/or other medications deemed necessary by said physician or hospital at the time.

I also grant permission to release medical information on my son/daughter incident to his/her participation in the above activities.

I will assume financial responsibility for this medical treatment either directly or through insurance.

X \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Parent or Guardian

STATE OF FLORIDA, COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this \_\_\_\_\_ by \_\_\_\_\_  
(Date) (Name of person acknowledging)

who is personally known to me or has produced \_\_\_\_\_ as identification and who did (did not) take an oath.  
(Type of identification)

\_\_\_\_\_  
(Signature of Notary Public) NOTARY PUBLIC

Commission No. \_\_\_\_\_

\_\_\_\_\_  
(Name of Notary typed, printed or stamped)

★ ★ ★ ★ ★ ★  
**VERY IMPORTANT:**  
**ATTACH A PHOTOCOPY OF THE BACK AND FRONT**  
**OF YOUR INSURANCE CARD TO THIS FORM**  
★ ★ ★ ★ ★ ★





# JHS Band Student Information Sheet 2018-2019

Please fill in all information. Print using a black or blue pen. Write one letter per box.

**PLEASE PRINT NEATLY and use BLACK or BLUE ink !!**

**OR complete online at [JupiterBands.com/Forms](http://JupiterBands.com/Forms) RETURN by March 29, 2018**

Student Name (Preferred First Name/Last Name): \_\_\_\_\_

Student Number: \_\_\_\_\_

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Student Home Address (Street, Apt #, City, Zip): \_\_\_\_\_

Housing Development Name: (ex: Jupiter Farms, The Shores, Egret Landing, etc.) \_\_\_\_\_

Student Home Phone: \_\_\_\_\_

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Student Cell Phone: \_\_\_\_\_

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Grade in 2018-19: 

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Gender (circle one): M F Primary Instrument: \_\_\_\_\_

Student Email Address: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Mother's Home Address (if different from student's): \_\_\_\_\_

Mother's Occupation / Skills: \_\_\_\_\_

Mother's Home Phone (if different from student's): \_\_\_\_\_

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Mother's Cell Phone: \_\_\_\_\_

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Mother's Email Address: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Father's Home Address (if different from student's): \_\_\_\_\_

Father's Occupation / Skills: \_\_\_\_\_

Father's Home Phone (if different from student's): \_\_\_\_\_

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Father's Cell Phone: \_\_\_\_\_

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Father's Email Address: \_\_\_\_\_

Check here if you are interested in volunteering opportunities:  Mother  Father



# Release and Consent for Student Information Publication

Parents (including legal guardians) are required to provide written permission to their child's school if they wish to:

- 1) allow their child to participate in school activities and the School District to publish the student's name, school name, grade level, photograph, video image, art work, writing, etc. in annual yearbooks, graduation programs, web sites, school newspapers, approved news gatherings, releases and articles, etc.

**AND**

- 2) allow publication to the public of certain specified information (such as honors received) related to their child.

**DIRECTIONS:** If this is a blanket consent for all student publications throughout the school year, the parent will check the appropriate box and provide the school year. If a one-time release and consent for a special project is required, the parent will check the special release box and list below the name of the special project publication. The parent will sign and return to the student's school.

Student ID #	Student Name (first, middle initial, last)	Grade
School Name	School Contact	Contact Phone Number
Jupiter High School	Andrew Gekoskie	561-744-7921
Parent/Guardian Name		

**TYPE OF CONSENT** (check one only)

- blanket release and consent for all student information publications for school year \_\_\_\_\_  
I hereby give permission for the school or District to use my child's photograph, video image, writing, voice recording, name, grade level, school name, participation in officially recognized activities and sport, weight and height of members of athletic teams, dates of attendance, diplomas and awards received, date and place of birth, and most recent previous school attended, in annual yearbooks, graduation programs, playbills, school productions, web sites, social media sites, etc. and/or similar school or District sponsored publications or in school or District approved news media interviews, releases, articles, and photographs. I also provide permission for the release by the school or District to the media and governmental entities of my child's name, grade, school name and honors my child has received for public announcement of recognition of my student's accomplishments. **I understand that without checking the permission box** my child's name and photograph cannot and will not be included in any publications or presentation, including a school yearbook.

- special release and consent for the student information publication listed below:

I hereby give permission for the school or District to use my child's photograph, video image, writing, voice recording, name, grade level, school name, etc. in the special production named above.

I also understand the production, publication, presentation or materials may be submitted for classwork, for open broadcast by *Instructional Television (ITV)*, *The Education Network (TEN)*, a film festival or contest or any other display according to the broadcast/ publication rules of the appropriate trade.

The School District of Palm Beach County shall have the right to sell, duplicate, reproduce or make other use of such rights transferred as The School District of Palm Beach County so desires. This agreement is given with free knowledge of the rights transferred to the School District of Palm Beach County. This agreement is made without restrictions or time limits.

- I give permission** for the consent request indicated above.
- I do not** give permission for the consent request indicated above.

\_\_\_\_\_  
*Signature of Parent/Guardian or Emancipated Student  
(including if age 18 or over - proof of age required)*

\_\_\_\_\_  
*Date*

# Jupiter High School Band Handbook Acknowledgement Form

Dear Parents and Students:

Please read the Jupiter High School Band Handbook and return this signed sheet. Please read through the handbook so that you may become acquainted with the policies under which our organization is governed.

After reading the handbook, please acknowledge the following statements by printing both parent and student name, as well as signing and dating in appropriate places.

By my signature, I confirm that:

1. I have read the Band Handbook and agree to comply with the policies set forth therein. I agree that I will support the Band Director and instructional staff in following the policies within the handbook.
2. An unexcused absence from a performance or a rehearsal WILL result in a zero credit. A tardy from a rehearsal will result in partial credit. Multiple tardies or absences in a co-curricular activity will result in the student becoming an alternate.
3. I authorize the Band Director or his designees to render or secure First Aid for my son or daughter in the event of sickness or accident at on- and off-campus rehearsals, performances, and activities, and while en route to or from them, and I give my permission for the Band Director or his designee to secure immediate medical attention if necessary. I understand that parental contact will be made as soon as possible, and that treatment will follow the specifications listed by the parent or guardian on the Medical Release Form. I also agree that I will be responsible for the cost of all necessary treatments and/or services given to my child.
4. I hereby give permission for my child to participate in all band activities (including football games, marching and concert competitions, parades, and activity trips) during the school year. I understand that all trips will be taken with carriers approved by the Palm Beach County Schools, and will comply with all local and state governing rules. I agree that I, as a parent or legal guardian, will be financially responsible for any damages that my child causes and will incur the cost to transport my child home from a trip if his or her behavior warrants immediate attention.

\_\_\_\_\_  
Student Name (printed)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent Name (printed)

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

*This signed form is due Thursday, March 29, 2018*

# 2018-2019 Jupiter High School Band Color Guard Flag & Equipment Contract

*This form is DUE THURSDAY, March 29, 2018*



Color Guard equipment is owned by the Jupiter High School Band and is loaned to members of the Color Guard for use in rehearsals and competitions. This equipment includes but is not limited to rifles, sabres, flag poles, props, and flags.

Color Guard members are required to properly care for this equipment as described below.

**STUDENTS - Please initial at each line:**

**I understand that:**

- \_\_\_\_\_ **Flags must be kept clean.** The silks MUST be washed by hand OR in a washing machine on DELICATE cycle. Flags can be put in the clothes dryer to dry.
- \_\_\_\_\_ **Flags must be kept dry.** In the event that your flag gets wet (which will happen in the rain), you must let them dry completely before returning them to your flag bag. Flags can be air-dried or a blow dryer or clothes dryer can be used to help expedite the process.
- \_\_\_\_\_ **Flag fabric is very delicate.** DO NOT pull on your silk, sit on it, or wrap it around you (unless it is choreographed). These actions could cause tearing of the silk. Should you develop a hole in your flag please notify your Color Guard Liaison AS SOON AS POSSIBLE. The Liaison will determine if the flag how the flag can be repaired.
- \_\_\_\_\_ **All poles should have rubber tips on both ends.** The tips should be protected by electrical tape. The electrical tape should also attach the tip to the pole to ensure that it does not come loose.
- \_\_\_\_\_ **Flags and end tips should be re-taped at least once every two weeks.** With time and use, especially in the heat, electrical tape can become worn and loose. Poles may need to be re-taped more often depending on rehearsal conditions. The electrical tape is used to protect your equipment. It is important to replace the electrical tape to help increase the longevity of the equipment. *Each guard member is responsible for purchasing their own tape from the Band.* Depending on usage, color, and type, tape costs may vary from season to season.
- \_\_\_\_\_ **All equipment should be stored properly in the flag bag.** To properly store a flag, you must roll the silk around the pole before placing it in the bag.
- \_\_\_\_\_ **Replacement of lost equipment or repair to damaged equipment is the financial responsibility of the Color Guard student.** If equipment is not returned on time or is irreparably damaged, the student's fundraising account will be charged to replace that equipment. If a cost is associated with any equipment that needs repair, the student's fundraising account will be charged to cover the repair.
- \_\_\_\_\_ **Flags must be WASHED, DRIED and FOLDED and placed in a Ziploc bag at the end of the season.** Flags should be clean, dry and in good condition prior to return.

Upon signing this contract, the Color Guard member agrees to care for all JHS Band equipment as described above.

\_\_\_\_\_  
Student Name (printed)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent Name (printed)

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date