

Hixson HS Band  
2019-2020  
Student Forms

# 2019-20 Hixson Marching Band Parent Forms and Information

*Please keep these for your reference:*

Summer/Fall 2019 Band Calendar

*Please fill out/sign as indicated and return as soon as possible:*

- Marching Band Fee Agreement
- Travel Permission Form
- Medical Form

## HIXSON HIGH SCHOOL MARCHING BAND FEE NOTIFICATION

Please sign and return the bottom part of this form as soon as possible.

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

Grade (9-12): \_\_\_\_\_

1. There is a \$300 fee for participation in extra-curricular (after school) Marching Band activities. *This fee does not apply to students who are enrolled in the Band class at Hixson High School but elect not to participate in after school events.*
2. The Marching Band fee is payable to Hixson High School, and is not eligible to be waived, as it applies to *extra-curricular* activities only.
3. Fund-raising will be available through the Hixson High School Band Boosters to students and parents as needed to help defray the cost of the Marching Band fee.
4. The Marching Band fee specifically goes toward helping to pay for:
  - Bus transportation to and from Marching Band performances (away football games, contests, parades)
  - Supplemental instructors for Marching Band students
  - The current year's Marching Band T-shirt
  - Marching Band equipment and supplies for the current season
6. *Students will not be eligible to perform at football games or contests, or to travel with the marching band until all forms in this packet are signed and returned to Mr. McHenry. (Students will still be allowed to attend after-school practices)*

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I understand that by allowing my child, \_\_\_\_\_, to participate in after-school Marching Band activities, I am responsible for the \$300 Marching Band fee.

Parent or Legal Guardian's Signature: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Date: \_\_\_\_\_

## HIXSON HIGH SCHOOL MARCHING BAND PERMISSION SLIP

This form is to be completed for each child for the trips listed below.

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

Grade: \_\_\_\_\_ Date: \_\_\_\_\_

1. Students participating in band trips must use the designated means of transportation. The band will use school buses or HCDE approved charter coaches.
2. All band trips will be chaperoned.
3. Band staff and chaperones expect conduct that will reflect positively on you, your family, the band, and Hixson High School.
4. Parents should secure appropriate insurance coverage.

I/we, the undersigned, hereby grant permission for \_\_\_\_\_  
to participate with the Hixson High School Marching Band in the activities listed below.

### Football Schedule

Fri	Aug 30	Signal Mtn.	Away
Fri	Sept 6	Anderson Co.	Away
Fri	Sept 13	Sequatchie Co.	Home
Fri	Sept 20	Sequoyah	Home
Fri	Sept 27	Boyd Buchanan	Home
Fri	Oct 4	Soddy Daisy	Home
Fri	Oct 11	East Hamilton	Away
Fri	Oct 18	Central	Away
Fri	Oct 25	East Ridge	Home
Fri	Nov 1	Howard	Home
Fri	Nov 8	Playoffs <i>(possible, depending on the FB team's record)</i>	

### Contest Schedule

Sat	Sept 28	Bradley Central
Sat	Oct 19	Soddy Daisy
Sat	Oct 26	Rome

I/we do hereby agree to release from any and all liability and otherwise hold harmless all school personnel acting in their supervisory capacity for personal injury, property or other type of loss which occurred as a result of these activities.

I/we further authorize chaperones to seek and arrange for emergency medical care, hospitalization or surgery that may become necessary in my absence and I/we will assume financial responsibility for same.

I/we authorize HHS Band staff to contact my child via cell phone/text message to distribute information and keep in touch during trips

The school sponsors, schools and Hamilton County School officials will make every reasonable effort to properly supervise, control and render safe all activities in the planned program below.

Parent or Legal Guardian's Signature: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Date: \_\_\_\_\_

Food Allergy     Medication Allergy     Other Serious Allergy

**2019-2020 HIXSON HIGH SCHOOL BAND**  
**EMERGENCY MEDICAL INFORMATION & AUTHORIZATION**

School & Organization Hixson High School Band

Teacher(s) Matt McHenry

Student Name \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Student Social Security Number \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ TN, Zip \_\_\_\_\_

**PURPOSE:** To enable parent(s) and guardian(s) to authorize the provision of emergency treatment for children who become ill or injured while under school authority, when parent(s) or guardian(s) cannot be reached.

**PART I. CONSENT TO TREAT – In the event reasonable attempts to contact**

\_\_\_\_\_ AT \_\_\_\_\_ OR  
mother/guardian      home phone      cell phone      work phone

\_\_\_\_\_ AT \_\_\_\_\_ OR  
father/guardian      home phone      cell phone      work phone

\_\_\_\_\_ AT \_\_\_\_\_ OR  
emergency contact/relationship      home phone      cell phone      work phone

\_\_\_\_\_ AT \_\_\_\_\_  
emergency contact/relationship      home phone      cell phone      work phone

have been unsuccessful, I hereby give my consent for the administration of any treatment deemed necessary by:

Dr. \_\_\_\_\_ OR  
(preferred physician)      (office telephone)

Dr. \_\_\_\_\_  
(preferred dentist)      (office telephone)

In the event the designated preferred practitioner is not available, another licensed physician or dentist will conduct the administration of any treatment deemed necessary.

This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists, concurring in the necessity of such surgery, are obtained prior to the performance of such surgery.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

(Over)

**PART II. MEDICATIONS TAKEN AT LEAST ONCE A MONTH**  
(Please include both prescription & over-the-counter medications.)

Name of Drug	Dosage	Frequency	Reason for Drug
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Date of Last Tetanus Shot: \_\_\_\_\_

Other facts concerning the student's medical history to which medical personnel should be alerted (i.e. allergic reactions, past major surgeries, etc.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PART III. INSURANCE INFORMATION**  
(Please attach a copy of your insurance card.)

Primary Insurance Carrier \_\_\_\_\_

Name on Policy (Guarantor) \_\_\_\_\_

Social Security Number of Guarantor \_\_\_\_\_

Policy Number \_\_\_\_\_

Secondary Insurance Carrier \_\_\_\_\_

Name on Policy (Guarantor) \_\_\_\_\_

Social Security Number of Guarantor \_\_\_\_\_

Policy Number \_\_\_\_\_



## HHS Band Summer/Fall 2019 Calendar

<b>April 15-18</b>	Auditions - Percussion & Color Guard	3-5 PM
<b>April 23</b>	Auditions - Drum Majors & Majorettes	3-5 PM
	Color Guard - Alt Tryout Date	3-5 PM
<b>April 30, May 7, 14, 21</b>		
	Color Guard & Percussion rehearsal	3-5 PM
<b>May 28-29</b>	Training for new marching band members (woodwinds/brass only)	10 AM-2 PM
<b>May 28, June 4, 11, 18, 25 &amp; July 9</b>		
	Color Guard & Percussion rehearsal	10 AM-2 PM
<b>July 8-10</b>	Rehearsal for Color Guard, Percussion, New Marching Band Members	9 AM-2 PM 9 AM-1 PM
<b>July 15-19</b>	Marching Band Camp	8 AM-4:30 PM
<b>July 30</b>	Full Marching Band rehearsal	5-8 PM
<b>Aug 1</b>	Full Marching Band rehearsal	5-8 PM
<b>Aug 7</b>	First day of school	
<b>Aug 8</b>	After school rehearsal (full band)	2:30-4:30 PM
	<i>Marching Band will rehearse after school every Tues &amp; Thurs through the first week of November</i>	
<b>Aug 30</b>	FB game vs Signal Mountain (Away)	7:30 PM
<b>Sept 6</b>	FB game vs Anderson Co (Away)	7:30 PM
<b>Sept 13</b>	FB game vs Sequatchie Co (Home)	7:30 PM
<b>Sept 20</b>	FB game vs Sequoyah (Home)	7:30 PM
<b>Sept 26</b>	Homecoming Parade	TBD
<b>Sept 27</b>	FB game vs Boyd Buchanan (Homecoming)	7:30 PM
<b>Sept 28</b>	MB Contest #1	TBD
<b>Oct 4</b>	FB game vs Soddy Daisy (Home)	7:30 PM
<b>Oct 7-11</b>	HCDE Fall Break (no Tues/Thurs rehearsal)	
<b>Oct 11</b>	FB game vs East Hamilton (Away)	7:30 PM
<b>Oct 18</b>	FB game vs Central (Away)	7:30 PM
<b>Oct 19</b>	MB Contest #2	TBD
<b>Oct 25</b>	FB game vs East Ridge (Home)	7:30 PM
<b>Oct 26</b>	MB Contest #3	TBD
<b>Nov 1</b>	FB vs Howard (Home)	7:30 PM
<b>Nov 8</b>	TSSAA Football Playoffs (possible, based on team record)	