

Letter of Mutual Consent

I, the undersigned student, accept membership in the Central High School Band and understand that I am responsible for the policies and OBLIGATIONS as set forth and maintaining the set GPA required by the Central High School Band Handbook. I fully agree to carry out all my responsibilities to the best of my ability.

(STUDENT SIGNATURE)

(DATE)

(STUDENT NAME PRINTED)

I, the undersigned parent or guardian, have read and understand the policies, obligations, and GPA requirement as set forth by the Central High School Band Handbook. I also grant full permission for my child to be an active member of the Central High School Band program. In addition, my child has full permission to attend and participate in all band functions. Furthermore, I understand that I must meet all financial obligations.

(PARENT SIGNATURE)

(DATE)

(PARENT'S NAME PRINTED)

STUDENT INFORMATION

STUDENTS NAME

PARENT NAME(S)

ADDRESS _____ CITY, STATE ZIP _____

STUDENT'S CELL PHONE

MOTHER'S CELL PHONE

FATHER'S CELL

HOME PHONE

MOTHER'S WORK PHONE: _____

FATHER'S WORK PHONE

MOTHER'S EMAIL

FATHER'S EMAIL

STUDENT'S EMAIL

OTHER PHONE _____

OTHER PHONE

SHIRT SIZE

PANT SIZE

SHOE SIZE