BMMS Chorus MEDICAL and PERMISSION FORM

Student Name	DOB	Grade
Parent Name(s)		
Mailing Address		
Parent Phone(s) H	Cell_	
MW	FW	
Emergency Contact	Phone	<u>-</u>
I give my permission for the above-named s for my child to receive medical treatment fo		rities for his/her choir. I give my permissio
Parent or Guardian Signature		
Insurance Company		
Insurance Policy Number		
Student's Allergies		
Student's Medication(s)		
Last tetanus shot (Date)		
Known Medical Conditions		
Known Allergies		
Name of Physician	Phone	
Statement of	f Understanding for Chorus	Membership
I,, desire to what is expected of me. My signature below s this handbook.	be a member of the Bennett's Mill Middle ignifies that I will try to the very best of n	e School Chorus. I have read and understand ny ability meet the expectations outlined in
Student's Signature		Date
I have read the BMMS Chorus Handbook	and Syllabus and will support my child	in meeting these obligations.
Parent or Guardian Signature		Date

Chorus Parents Volunteer Sign-up 2013-14

The chorus program at Bennett's Mill Middle School will be very active throughout the year. There are many opportunities for you to help. Below is a list of activities and the type of help that is needed. Please try and help **at least** one time during this school year. Thank you in advance for your assistance.

Your name		Student's name	
Evening phone		Grade Period	
Day phone		Cell Phone(s)	
E-mail Address			
	ent(s) that you are willing to he re most of our needs.	p with. One of the Coordinator	's will contact you prior to
	rew (load/unload/set up) for Co	ncerts at BMMS	
Data Entry/Pa	nperwork		
		DPE (Choral Festival) Ch	
Uniform Help	per		
Fundraiser pa	perwork preparation	Fundraiser Distribution	
Money count	ers for fundraisers (daytime)	Fundraiser unloading crev	
		Videographer	
Choral Council Men			
Chaperone Coordin	ator -		
Publicity Coordinate			
Uniform Coordinate			
Tech Team Coordin			
Bronco Ice Coordin		no of the unfilled mositions, place	va lat ma Irnavy Wa will
have short meetings	throughout the year.	ne of the unfilled positions, pleas ************************************	
Student Name			
Activity Fee:	\$45.00 due by September 5th		
Amount enclosed	Check Number		

Please fill in the appropriate blanks, sign and return with payment **no later** than **September 18, 2013*****Please make checks payable to the **Bennett's Mill Middle School Chorus*****

If you need to speak with me about the Activity Fee please feel free to call or email.