

Midlands Home School Band

P.O. Box 3251 Irmo, SC 29063

www.midlandsband.org

Registration Form

Parent/Guardian Name(s) _____

Mailing Address _____

Home Phone _____ E-mail Address _____

Other Phone Mom _____ Other Phone Dad _____

Emergency Contact Name _____ Phone _____

List your legal accountability organization _____

In order for our students to participate in events sponsored by the SCBDA (South Carolina Band Directors Association), MHSB must be able to provide SCBDA with written evidence of the legal home school status of each student. This is usually in the form of a letter from your accountability organization giving names and grades of all your students in the band. **Please attach a copy of your Accountability Group verification letter.**

Volunteer: I agree to volunteer in at least one activity, position or duty of the MHSB during the course of this coming year.

Parent Name _____ Signature _____

MHSB Commitment of Participation:

Students are expected to participate in all scheduled concerts unless prior exemption from the Director of Bands has been given. Parents and students must be aware of and agree with the contents of the MHSB Handbook listed on the MHSB website (www.midlandsband.org) before signing this form.

Circle as applicable:

MHSB Directory I give / do not give my permission to include my family's information (name, home phone number, e-mail address, and zip code) in the MHSB Directory provided only to the members of the band

Photographs I give / do not give my permission to MHSB to use my student's picture and name in concert and promotional materials, media, and the MHSB website (pictures not associated with names on websites).

Student Information

1. Name _____ Nickname _____ M or F

Birthday ___ / ___ / ___ Grade ___ as of this Current or Upcoming school year Instrument _____ Years Playing ___

2. Name _____ Nickname _____ M or F

Birthday ___ / ___ / ___ Grade ___ as of this Current or Upcoming school year Instrument _____ Years Playing ___

3. Name _____ Nickname _____ M or F

Birthday ___ / ___ / ___ Grade ___ as of this Current or Upcoming school year Instrument _____ Years Playing ___

4. Name _____ Nickname _____ M or F

Birthday ___ / ___ / ___ Grade ___ as of this Current or Upcoming school year Instrument _____ Years Playing ___

IMPORTANT: If any of your MHSB students have allergies or other conditions instructors should be aware of, please list/explain on bottom of the following page.

Annual Fee and Payment Information

Tuition per Student - Band: \$210/yr or \$30/mon for 8 months
Ensembles: \$120/yr.

If paying monthly, \$30 due before the 15th of each month for the months of Sept - Apr.

Commitment of Participation

As members of the Midlands Home School Band we agree to satisfy the following commitments to the best of our ability:

- As a student I commit to participating in every scheduled band performance and as a parent I commit to enabling my child to satisfy this obligation.
- As an individual I have read and commit to abide by the policies as outlined in the MHSB Handbook.

Student's Signature

Parent's Signature

ALLERGIES AND OTHER HEALTH ISSUES

dual fundraisers.