

CONSENT AND ACKNOWLEDGEMENT OF RISK AND STUDENT ACKNOWLEDGEMENT 2010-2011

The following shall be acknowledged by the Parent or Guardian and Student where indicated and shall remain on file with the Director for the school year 2010-2011 and summers before and after the school year.

Student's Name: _____

PARENT/ GUARDIAN PORTION:

Parent Initial

____ I/We hereby grant permission and the absolute copyright to publish, reproduce, and publicly display or use the Participant's name, voice or likeness for any purposes connected with promoting the purposes and goals of the Gaither High School Instrumental Music Program and waive any right to inspect or improve the finished product or the copy that may be used in connection therewith.

____ I/We hereby grant permission for the above-named student to participate in all Gaither High School Band activities and trips during the school year 2010-2011, including the summers before and after the fiscal school year. These trips or activities include but are not limited to: band camp, band rehearsals, all football games, marching band festival(s), concert band and symphonic band performances and trips, parades, fundraising activities, and all FBA Music Performance Assessment Festivals.

____ I/We understand the method of transportation will usually be by school bus or charter bus, but in some special situations, it may be necessary to travel by private vehicle. If this should occur, the driver of the private vehicle will be an adult and a licensed driver over the age of 25. This will be done in compliance with DOE policy: Section 1006.22 F.S.; s.1006.24.

____ I/We understand that under present law, if my/our child is riding in a private passenger automobile that is involved in an accident, he/she will be primarily covered for bodily injury under my/our family automobile policy, and I/we agree to submit any medical bills incurred to my/our insurance company for payment. (Section 1006.22 F.S.; s.1006.24)

____ I/We consent to medical treatment and assume full responsibility and liability for any and all expenses, damage, accident, illness, injury or medical expense of and to my/our child or property resulting from such participation.

____ I/We attest and affirm that the participant has no limitation that should prevent participation in the activity and I/we have not been advised or informed by anyone to the contrary. If there is any condition that may limit participation in any band activity, please describe medical information form.

____ I/We further agree to inform the appropriate school official(s) should my/our child's physical condition change in any way and any time so as to affect his/her participation in the activity herein named.

____ I/We understand that all necessary precautions will be taken by the teacher, school, and the School Board of Hillsborough County for the welfare of my child, and I will not hold those parties responsible in case of injury to my child.

The consent and Acknowledgement of Risk shall not be amended, supplemented or abrogated without the written consent of Gaither High School.

Signature of Father/Guardian

Date

Signature of Mother/ Guardian

Date

STUDENT PORTION:

I agree to abide by all of the rules, regulations, and responsibilities as established by the Gaither High School Band Program.

This application to participate in the Gaither High School Band Program is made with the understanding that I have not violated any of the eligibility rules and regulations of the Florida High School Student Activities Association or FSMA. I understand that any misrepresentation of eligibility, as well as any future violation of these and all other rules and regulations of this organization, will result in dismissal from the organization. I understand that my membership in the Gaither High School Band Program is contingent upon the completion of this form in a satisfactory manner, and understanding of the policies and rules set forth in the Band Handbook. Additionally, I agree to accept full responsibility for any and all Gaither High School Band instruments and equipment, and will reimburse the band program fully for any damage or misuse due to my negligence.

Signature of Student

Date