John A. Johnson High School Music Program
Packet of Forms for Return 2016-2017

Please return this packet intact, as stapled, the second day of class.
Page 1: (this page) assures that you have received class information
Page 2: (field trip form) is used for emergency phone numbers and health cautions
Page 3: (MSHSL) is required by the High School League. The rules it refers to are available on www.mshsl.org.
Pages 1-3 must be properly completed before any student may participate.

The last page (Instrument form) is for families requesting a school instrument. All forms must be properly completed before a school instrument may be issued. Families not requesting a school instrument do not need to complete this form. (All percussionists [drummers] need to complete this form.)

Class Information Sign-offs
• We have the 2016-2017 information sheet

• We have the 2016-2017 Dates Schedule, included with the information sheet.

• We will make appropriate plans in advance for our student’s transportation home from Johnson High School after each event in which they participate.

• We understand that all electronics, including cell phones, are to be turned off, put away, silent, and ignored during class and as instructed at events.

• We have the school office phone number (651-293-8890) in case of family emergencies during the school day.

Student Signature:_____________________________ Date:___________

Parent Signature:_____________________________ Date:___________
SAINT PAUL PUBLIC SCHOOLS
FIELD TRIP PARENTAL/GUARDIAN AUTHORIZATION FORM

TYPE II FIELD TRIPS

A field trip to: BAND/ORCHESTRA EVENTS **OUTSIDE OF THE SCHOOL DAY**
is planned by: BAND/ORCHESTRA
for the purpose of: PERFORMING and/or watching performances
on (date): as shown on schedule or announced
from scheduled/announced (time) to scheduled/announced (time).

The attached form must be completed and returned before the student will be
permitted to participate in the above field trips.

**VERBAL APPROVAL WILL NOT BE ACCEPTED.**

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Field Trip Parental Authorization

____________________________ Johnson High School
Student’s Full Name

____________________________

Parent/Guardian's Name

Does the student have any special health problems or handicapping conditions which
will require special attention or supervision on this field trip?

Yes___No___

If yes, what is this problem and what special considerations should be made?

____________________________________________________________________________
____________________________________________________________________________

We understand that the necessary arrangements, plans, and precautions will be taken
for the care and supervision of the student during the trip.

I/We authorize ______________________to participate in the field trips

Student’s Full Name
to band/orchestra performances as scheduled/announced.

Telephone Numbers: Emergency ________________

Home________________________

Date___________Parent/Guardian Signature_________________________________________
ENFORCEMENT OF STATE HIGH SCHOOL LEAGUE POLICIES

Chemical and Tobacco Use/Abuse Policy as ordered by the Minnesota State High School League Fine Arts Eligibility Information document:

Tobacco Use
Students using tobacco in any form at an instrumental event will be referred to their assistant principal on the next day of school. This use is considered a violation on school grounds. The student will not letter in music during that academic year.

Mood Altering Chemicals
“Students will not use a beverage containing alcohol, nor use or have in their possession any illegal drug or related paraphernalia, nor use a prescription drug in a manner not prescribed. Use or possession of any amount, at any time, violates this policy.’’

• For any suspected violation, the administrative team, chemical health specialist, and athletic director will be informed. The student’s assistant principal shall notify the parents to determine what plan of action will best assist the student.

• Students with any violations will not:
  • qualify to go to the MSHSL solo/ensemble contest that year.
  • qualify to earn letter awards in band or orchestra that year
  • qualify to audition for or participate in the next Ordway Honors Concert.

Note: District directors have set and enforced the policy that students auditioned and selected for the Ordway concert will be dropped from the concert if they commit violations between auditions and the concert.

• If the director suspects use in class or at an event, the student involved will be transferred to administration, parents, or law enforcement authorities depending on who is available at the location. If the situation is at an athletic event performance, the student will be disqualified from the next athletic event performance, just as they would be for other inappropriate behavioral choices at such an event.

Other Policy Areas. Both the MSHSL and the school district have policies forbidding sexual, racial, or other harassment, and you will be referred to the administration should you fail to comply.

Endorsements
We understand this policy, and the policy of the State High School League. As parents, we agree to support our sons or daughters in abiding by this policy. As students, we agree not to possess or use alcohol, marijuana, or illegal drugs or related paraphernalia in any amount, at any time. Further, we agree to support our peers who make the same decision.

Date: __________ Parent Signature: ____________________________

Date: __________ Student Signature: ____________________________

Policies can be viewed at www.mshsl.org.
JOHNSON HIGH SCHOOL INSTRUMENTAL PROGRAM
REQUEST FOR INSTRUMENT CHECK-OUT
This form must be completed and returned before an instrument is issued.

Student Name:____________________________________________

Circle Grade and Ensemble:  9  10  11  12     Orchestra   Band

Instrument Requested:______________________________________

• As parents or guardians of the student listed above, we accept financial responsibility
  for this/these instrument(s) and their condition during the check-out period. Any loss
  or damage will be promptly reported to the director, who will choose the repair
  vendor, and any repair bills will be repaid to the school without delay before the
  repaired instrument is returned to the student.

• We understand that our son or daughter's treatment of the instrument is the primary
  factor in determining its frequency and expense of repair, and that we must purchase,
  and use appropriate supplies for the instrument's upkeep. (Cork grease, valve oil, etc.)

• School instruments are assigned at the discretion of the director, who may choose to
  cancel such assignments at any time due to student behavior or instrument treatment.

• No one except the assigned student is to use the equipment without the approval of
  the director.

• Students using equipment that is assigned to more than one student (such as drums)
  are responsible for reporting any odd conditions immediately (before use), as the
  students who last used the equipment will be financially responsible.

• Parents are advised that music store rental programs offer optional insurance
  covering loss or damage of their rental instruments at a low monthly fee, and that
  instrument rental applies towards later purchase through most of these programs.

Parent Signature:________________________________________

Date:__________ Phone Day________________Evening________________

Student Signature:_______________________________________

***Area Below to be Completed at Check-Out***

Instrument________________________________Bin #___________

Serial#___________________SPPS# (silver tag)____________________

List any damage or conditions of concern:

Student Signature indicating
condition & receipt of instrument_________________________________