

**GREENSBURG SALEM HIGH SCHOOL MARCHING BAND**  
**2018-2019 CONSENT FORM**

This form is to be filled out completely and returned to Mrs. West no later than Friday, June 1, 2018.

Student Name: \_\_\_\_\_

Instrument/Section: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

(Parent) email address: \_\_\_\_\_ @ \_\_\_\_\_

Parent/Guardian name(s): \_\_\_\_\_

**Acknowledgement**

My son/daughter has my permission to perform and travel as a member of the Greensburg Salem Marching Band during the 2018-19 school year. I hereby acknowledge that I have read the entire Band Handbook and agree to adhere to these policies. I agree to contribute at least 100 fundraising points for performers or 50 points for Managers/Honor Guard to my son/daughter's GSBPA points account, in order to enable my son/daughter to participate in any non-district funded events throughout the school year.

*Please sign below:*

Student: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_