



SOUND OF NORTH 2020-2021 CONSENT FORM

Please go to soundofnorth.band and complete the online registration form for this season (if not completed previously) prior to completing this form.

Please initial box by each statement for which you give consent then sign and date bottom of page. Please bring to volunteer check in table 7/15-7/17 either at beginning or end of practice (table will not be staffed during entire practice).

This form is for permission and consent for the following students:

If all students do not get the same consent, please fill out separate forms for each student.

1. I understand the guidelines for 2020-2021 band camp (current as of 7/8/20) and give consent for the student(s) named above to participate in camp 7/15-17, 20-24 & 27-31 as well as the upcoming marching season.
2. I give consent to treat the student(s) named above in the case of a medical emergency in accordance with information given in my answers on the online registration form.
3. I DO NOT give consent to treat the student(s) named above in the case of a medical emergency and wish to be contacted instead. Best contact number _____.
4. I give consent for Sound of North to give the student(s) named above the over the counter medications chosen for each student on the online registration form. Note: Please make sure any allergies were noted on online registration form. Also, please contact Katie Lykins (SoN Head Nurse, Bklykins03@hotmail.com) for procedures related to dispensation of prescription medicines during band activities.
5. I acknowledge the SoN fees and payment schedule for the 2020-2021 marching season in the amount of \$450 with an additional concert band fee of \$50 and agree to pay the fees in a timely manner or reach out to Mr. Munoz (munozb@bcsc.k12.in.us) to determine an alternative fee payment schedule by August 6, 2020 .

Parent/Guardian Signature _____ Date _____

Printed Name _____