

**SIGN AND RETURN THIS FORM TO BE PUT ON FILE**

**AGREEMENT FORM FOR BAND MEMBERS 2017-2018**

**Participation in the Buckeye Local Schools Band Program requires this form to be signed and returned by all members**

**PLEASE READ THE INFORMATION ENCLOSED IN THIS HANDBOOK AND THE ATTACHED GRADING POLICY. DETACH THIS PAGE, SIGN AND DATE AND RETURN.**

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I HAVE READ THE ENTIRE BAND MANUAL AND GRADING POLICY. I UNDERSTAND THE RULES AND PROCEDURES AS THEY ARE OUTLINED. I AGREE TO COMPLY WITH THESE RULES AND SERVE AS A RESPONSIBLE BAND MEMBER WHILE REPRESENTING MY SCHOOL AND COMMUNITY.

STUDENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

DEAR PARENTS:

PLEASE READ THE HANDBOOK AND ATTACHED GRADING POLICY. SIGN THE DOCUMENT SO THAT WE KNOW THAT YOUR CHILDREN HAVE SHOWN YOU THE BAND RULES AND PROCEDURES.

PARENT OR GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_