



NOKOMIS ELEMENTARY SCHOOL
Dr. Benson, Band
Beginners Permission Slip Sheet
PLEASE COMPLETE AND RETURN THIS FORM!

INSTRUMENTAL MUSIC PARTICIPATION CONTRACT

We understand the attached contract and will do our best to ensure the success of my child's Instrumental Music Program _____

Parent/Guardian Signature

I understand the attached contract and will do my best in the Instrumental Music Program at Nokomis Elementary School _____ Student I.D. _____

Student Signature

INSTRUMENT USAGE

I understand that Sachem Central School District is not responsible for loss, theft or other damage to musical instruments. Sachem does not guarantee security, nor does the District provide coverage for theft, vandalism, mysterious disappearance, or damage to privately-owned or commercially rented, should such actions occur in transit to and from school, or while the instrument is being stored on Sachem property.

Student's Name: _____ Parent/Guardian Signature: _____

School: NOKOMIS ELEMENTARY Date: _____

EXTENDED DAY: FEBRUARY –MAY 18th

Student Name: _____ Class: 4- _____

- ___ My child has permission to WALK from school for the extended day program.
- ___ My child will be picked up **on time** at the main entrance.
- ___ My child will be going to the After Care program.

Home phone: _____ Cell phone: _____

Email: _____

Parent/Guardian Signature: _____

CONCERT DATE PERMISSION

I have read the attached and understand the obligation of my child _____ to attend the 'Beginners' concert on **May 19th, 2019**.

School NOKOMIS Class: 4 - _____ Parent/Guardian Signature _____