Parent and Student Agreement Form

Student's Name: (Please Print)_____

Parent's/Guardian's Name: (Please Print)_____

I/We the parent(s)/guardian(s) of the above named, have read the Show Choir Constitution, the Estimated Show Choir Participation Costs Sheet, and the Tryout and Practice Schedule found in the Choir Handbook. We understand all the requirements, expectations, and consequences for improper actions. We understand the director, with the assistance of school administration, has the authority to remove a student from the ensemble. We know that the director's decisions regarding student placement within groups is final and we will not question the decision. As parents, we realize that we **WILL** be called upon to assist the ensemble by volunteering throughout the year (INCLUDING SIGNING UP FOR 2 SHIFTS TO WORK AT SW SHOWDOWN!), and will make every effort to assist the ensemble on behalf of our son/daughter. *Our family is aware of the \$600 cost required per student to continue to have a program of LSW's caliber. Our financial responsibility is to pay \$300 to cover costume costs. We will plan to fundraise or donate the remaining \$300 and agree to have the full amount in my student's account by October 13th, 2015. We also understand that the \$200 is due upon acceptance into the group by May 19th, 2015.*

DO NOT SIGN THIS WITHOUT READING THE HANDBOOK!!!

Parent's/Guardian's Signature:_____

Date:_____

As a member of the Show Choir, I have fully read the Show Choir Constitution and understand what is expected of me in order to participate. I will work hard at every rehearsal and communicate with my director and my parents. I understand the consequences of poor behavior and/or inappropriate actions and will take responsibility for those actions. I understand that if I am caught using drugs or am in the vicinity of anyone using drugs, I WILL be subject to the school's Code of Conduct that my parents and I sign (this begins the minute your name is posted in March and carries over the summer). I will always keep in mind that I am representing my school, my community, my state and myself. *I am aware of the costs involved with participation in the ensemble and agree to help my family cover this costs*. I understand I will not be allowed to participate if the costs are not paid off by October 13th, 2015. I understand that if I have not paid off my show choir account, I will be unable to purchase dance tickets and be placed on the fines list until the account has been paid in full.

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Student's Signature:_____ Date:____

_ Date:_____