

Broncho Band Fee Refund Policy

If a student decides to quite the Broncho Band for any reason (i.e. medical, relocation, personal choice, or disciplinary reasons) the following policy will apply to refunds:

- ➤ If a student drops band <u>during summer band</u> 100% of the fees paid will be refunded.
- > If the student drops band within the first week of school 50% of the fees paid will be refunded.
- ➤ If the student drops band <u>after the first week of school</u> no refunds will be givens unless individually approved by the Director of Bands.

It should be noted that money earned from fundraisers will **NOT** be reimbursed and will be subtracted from the band fees credited to the date before determining what amount should be refunded.

If a student has <u>credit</u> in their ledger at the end of the school year those funds will rollover to the ledger for the following year until the student graduates. If a student chooses not to return to the band program the following year those funds become property of the Broncho Band and will not be refunded.

Seniors who graduate with a credit balance in their ledger will not be refunded those funds. If a younger sibling will be in the band the following year credit balances can be transferred to the sibling otherwise the funds become property of the Broncho Band

*** No refunds will be given on soft goods such as jugs, shirts, shorts, bags, decals or spirit wear. ***

Please direct any refund inquires to the President at odessabandboosters@gmail.com.

I have read this agreement and by signing below agree to the Band Fee Refund Policy.			
Printed Parent or Guardian Name	Signature of Parent or Guardian		



Odessa High Broncho Booster Club Membership

NAME:				
EMAIL:				
PHONE:		Home	Cell	Work
ADDRESS:	ZIP:			
STUDENT'S NAME (if applicable):				_

The Booster Club is open to anyone – parents, grandparents, or interested persons. The purpose of the club is to directly support the efforts of the Odessa High School Band. The Booster Club operates on a yearly budget which provides for or supplements, the following: marching show expenses and drills, marching contest trips, expert clinicians, transportation, equipment repair, awards, rewards, music, parties, food, snacks, medical supplies, uniform repairs and cleaning, clerical supplies, spring competition and performance trips, and various other needs of the students. A non-refundable \$25 per family booster club membership fee will be paid yearly and is included in the student's band fees.

The Odessa High Band booster is a 501c Non-Profit Organization.

NOTE: Sponsors are responsible for securing a form for each participating student.

ODESSA HIGH SCHOOL STUDENT TRAVEL MEDICAL INFORMATION AND RELEASE

This Form

Student's Name:		Must Be NOTARIZED
Parent's Name:		
Address:		
Please give address and phone number where parents may be reached	d while student is on the trip.	
List medications the student will be taking while on this	trip & how often it needs to be tak	en (use the back if necessary).
List any known allergies that the student might have:		
Name of physician to contact in case of an emergency: _		
Physician's phone number:		
Name(s) and numbers of any party to be notified if the p		
In case of an emergency, I hereby give John Mayo, Jimn		
and Orchestra Booster Club parent permission to have m	edical treatment administered to the	ne student mentioned above,
realizing that the expense for said treatment will be the re	esponsibility of the person signing	this form, and that every
attempt will be made to notify the parent(s) or the guardi	an immediately.	
Insurance Company	Policy Number	
STATE OF TEXAS COUNTY OF		
This instrument was acknowledged before me on	by	
(SEAL)		
Signature of Notary Public	Signature of Signer	
My Commission Expires:	_	

PARENT/STUDENT UIL MARCHING BAND ACKNOWLEDGEMENT FORM

No student may be required to attend practice for marching band for more than eight hours of rehearsal outside the academic school day per calendar week (Sunday through Saturday). This provision applies to students in all components of the marching band.

On performance days (football games, competitions and other public performances) bands may hold up to one additional hour of warm-up and practice beyond the scheduled warm-up time at the performance site. Multiple performances on the same day do not allow for additional practice and/or warm-up time.

Examples of Activities Subject to the UIL Marching Band Eight Hour Rule:

- Marching Band Rehearsal (Both Full Band and Components)
- Any Marching Band Group Instructional Activity
- Breaks
- Announcements
- Debriefing and Viewing Marching Band Videos
- Playing Off Marching Band Music
- Marching Band Sectionals (Both Director and Student Led)
- Clinics for the Marching Band or any of its Components

The Following Activities are not included in the Eight Hour Time Allotment:

- Travel Time to and from Rehearsals and/or Performances
- Rehearsal Set-Up Time
- Pep Rallies, Parades and Other Public Performances
- Instruction and Practice for Music Activities Other Than Marching Band and its Components

NOTE: An extensive Q&A for the Eight Hour Rule for Marching Band can be found on the Music Page of the UIL Web Site at: www.uil.utexas.edu

"We have read and understand the Eight-Hour Rule for Marching Band as stated above and agree to abide by these regulations."

PARENT SIGNATURE	DATE
STUDENT SIGNATURE	DATE
STUDENT PRINTED NAME	

ECTOR COUNTY INDEPENDENT SCHOOL DISTRICT PARENT TRAVEL CONSENT FORM

for participating in school-sanctioned activities during the 2021-22 school year as a member of the Odessa High School Band.

Faculty Sponsor(s): John Mayo, Jimm	ny Olague and Sarah Summersgill
STUDENT'S NAME:	GRADE LEVEL:
ADDRESS:	HOME PHONE:
PARENT/GUARDIAN'S NAME:	BUSINESS PHONE:
ALTERNATIVE ADULT:	BUSINESS PHONE:
this school year, including all errands Odessa High School Band program. T	sent to travel to and/or from each event participated in by this organization during and activities related to duties of and assignments made to members enrolled in the the mode of transportation may be ECISD or commercial bus, or a private vehicle. ool personnel, a parent, or the above-named student when the event is in Ector
	s not conduct himself/herself properly may be (i) sent home at the parent's expense, ture activities of this organization, and (iii) subjected to other appropriate
•	County Independent School District and its trustees, employees, sponsors, and y from liability resulting from any activities of this Organization, including liability of any such party.
authorization for first aid treatment an	th the approval of the sponsor or an ECISD employee, I give my approval and d any medical treatment by local physicians and/or hospital including surgical bility for payment of all charges incurred during this medical treatment.
Additional information or comments:	
This form must be signed and returned off-campus activities of this organization	d to the sponsor before the student will be permitted to drive his/her vehicle to any ion.
Date	Signature of Parent/Guardian
	Signature of Parent/Guardian

2021-22 PARENTAL/GUARDIAN CONSENT FORM

We are sending you this parental consent form to both inform you and to request permission for your child's photo/image to be published on the district, school or band's website or any social media pages.

As you are aware, there are potential dangers associated with the posting of personally identifiable information on a web site since global access to the Internet does not allow us to control who may access such information.

These dangers have always existed; however, we as schools do want to celebrate your child and his/her work. The law requires that we ask your permission to use information about your child.

Pursuant to law, we will not release any personally identifiable information without prior written consent from you as a parent or guardian. Personally identifiable information includes student names and/or a photo or image.

If you, as the parent or guardian, wish to rescind this agreement, you may do so at any time in writing by sending a letter to the band directors and the rescission will take effect upon receipt of said document by the teachers.

Check **ONE** of the following choices:

I/We **GRANT** permission for a photo/image that includes this student without any other personal identifiers to be published on the school and/or band's public Internet site. I/We GRANT permission for this student's photo/image and name to be published on the school and/or band's public Internet site. П I/We **DO NOT GRANT** permission for this student's photo/image or any other personal identifiers to be published on the school and/or band's public Internet site. ID #: _____ Signature of Parent/Guardian: Relation to Student: _____ Date:

OHS Band

CHARMS Update

2021-2022

Student Name	ID#	
Marching Instrument	Concert Instrument	
Student Cell Phone	Student email	
Student's home address		Zip code
Grade: Shirt Size:		2.10 0000
Adult #1 Name(One adult per student REQUIRED on t	file)	
Relation to Student	Adult #1 Cell phone	
Adult #1 email	and monthly statements)	
Adult #1's home address		Zip code
Adult #2 Name		
(You may list a second adult it you ch	oose)	
Relation to Student	Adult #2 Cell phone	
Adult #2 email(required to receive communications	and monthly statements)	
Adult #2's home address		 Zip code

Odeçça High School Band

Fees and Payment Contract

2021– 2022 Band Fees of \$450.00 must be paid in FULL by April 1, 2022

Student Name:	ID #	
Student Cell:	Student E-mail:	-
Parent Name:	Parent Cell:	
Parent E-mail:	(required)	
Booster Use Only:		
IF YOU HAD A BALANCE OWED AT THE EN	D OF LAST YEAR	
Current fees plus PAST DUE Balance Owed	(\$) = \$ balance due by April 1 st	
IF YOU HAD A CREDIT BALANCE AT THE EN	ID OF LAST YEAR	
Current fees minus Credit Balance (\$) = \$ balance due by April 1 st	
☐ Option #1 Payment in FULL now and save \$25	00	
	aac taaa,	
,	e on 1st of each month with final payment paid NO later	
CashApp, Zelle, or credit card in the	nts can be paid with check, cash, money order, PayPal, Booster Office by the 1st of each month (payments CAN be	j
take payments**	App for days and times that a booster will be available to	
I agree to the Payment Option chosen abo	ve and to the terms described within that Payment Option.	
Parent Signature	Date Signed	
Amount Paid Today \$ Date	via: □Card □Cash □MO □Ck#	