



123 MIDDLE CREEK PARK AVE

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PHONE: 919.773.3838

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WEBSITE: [HTTP://MIDDLECREEKHS.WCPSS.NET](http://MIDDLECREEKHS.WCPSS.NET)

May 19, 2010

Hello and welcome to Middle Creek High School and our award winning bands!

Please read the attached information carefully (some forms are front and back). Completed packets must be returned by Friday, August 27, 2010.

If you have received the wrong band forms or you changed your band course enrollment during the summer, please email Amy Woynicz at woynicz@mindspring.com. Additional copies of these forms can be downloaded from our band website at www.middlecreekband.org.

If you have any questions or concerns, feel free to call or email me at the information below.

I look forward to working with all of you to have a successful year!

Sincerely,

John J. Enloe
Band Director
Middle Creek High School Bands

“Obstacles are what you see when you take your eyes off the goal.”

John J. Enloe, Band Director
Band room phone number 919-773-3888
jenloe@wcpss.net
<http://middlecreekband.org>

PARTICIPATION/FINANCIAL COMMITMENT FORM

MIDDLE CREEK HIGH SCHOOL BAND

2010-2011

Student Name _____ Grade: F S J Sr.

Address _____ Marching Instrument _____

City, State, Zip _____

Home Phone # _____ Student Cell Phone # _____

Student E-mail _____

Yes, student's cell phone and home phone may be printed in the band directory

Father's Name* _____ E-Mail _____

Home Phone _____ Work Phone _____ Cell Phone _____

Mother's Name* _____ E-Mail _____

Home Phone _____ Work Phone _____ Cell Phone _____

*Guardian (if applicable, please indicate)

Student: I, _____ recognize that I am choosing to be a member of an organization where the utmost is expected of me in terms of excellence and character. I make a commitment to this organization in terms of time, energy and focus. I will give my very best at all times, make practice a priority, and I realize that rehearsals are for the good of the ensemble. As a member of the Middle Creek High School Concert Band, I will be in attendance for all scheduled rehearsals and performances unless of family need or emergency. I further expect of myself that I must demonstrate on a daily basis maturity and good character. I am part of an organization where others depend on me and for them I will expect the best from myself.

Student's Signature _____ Date _____

Parent/Guardian's Signature _____ Date _____

Parent/Guardian:

- **I understand that there is a commitment of \$70 for the 2010-2011 season associated with each member of the Concert Band. I understand and will adhere to the payment date schedule as delineated on the fair share schedule.**
- I understand that the commitments may be fulfilled by direct payment and/or by participating in fundraising activities. The fundraisers are subject to change but may include selling merchandise such as fruit, Chick-Fil-A Calendars, or other products.
- I understand that if I anticipate any difficulties in meeting this monetary requirement, I agree to meet with the band director, booster president and treasurer to discuss the commitment. All financial matters will be kept confidential and shared only with the director and treasurer and president of the boosters.

Check here to indicate a request for meeting: ()

Student and Parent/Guardian: We agree to meet the time and monetary commitments for MCHS Concert Band in 2010-2011.

Student's Signature _____ Date _____

Parent/Guardian's Signature _____ Date _____

What is “Fair Share”?

Fair Share Dues for the 2010-2011 school years is \$70.00.

\$35.00 is due on Friday, August 27, 2010 (with completed packet)

\$35.00 is due on or before Friday, September 17, 2010

Fair Share money is used for items such as:

- Sectional Specialists & Clinicians throughout the year
- Music purchases
- Instruments and instrument supplies and repairs
- Contest and entry fees
- Travel (gas and bus drivers)
- Student awards and plaques

In addition, there will be multiple opportunities for students to earn credits to their Fair Share accounts. In addition, there will be multiple opportunities for students to earn credits to their Fair Share. Fundraisers include grocery cards (\$3-5 for each \$100 card purchased based on the store), Chic-Fil-A calendars (\$2.25 per calendar sold), a Fruit Sale in November (approx 30% of total) and others. If students raise more than their Fair Share dues, then the credit will roll over into the next school year.

Please notify Mr. Enloe (919-773-3888) or Linda Lamb (Treasurer) at lmlamb@nc.rr.com if you are in need of financial assistance and we will do our best to accommodate you.

The Band Booster officers, under the guidance of Mr. Enloe, determine Fair Share dues based on the bands' anticipated expenses and income for the year.

Payment Options: We welcome payment in advance as well as twice a month. For example, with respect to any payment, half can be paid on the first and half on the 15th, as long as the total due for that particular payment is paid during the month it is due. We will NOT turn away a student from band for not having enough money. Please notify Mr. Enloe or the Band Booster Treasurer, Linda Lamb at lmlamb@nc.rr.com if you are in need of assistance and we will do our best to assist you and provide you with an alternative fee schedule.

Payable to information: All checks for payments should be made payable to MCHS Band Boosters and put in a sealed envelope with the student's name and "Fair Share Payment" on front and placed in the black mailbox in Mr. Enloe's office or with the completed forms.

Running a successful, award winning band program is expensive and our fantastic students work hard and need our financial support.

Thank you for supporting our students!

MEDICAL PERMISSION FORM
MIDDLE CREEK HIGH SCHOOL BAND--2010-2011

ALL INFORMATION ON THIS FORM WILL BE KEPT CONFIDENTIAL. The information on this form will be used for emergency situations only. It will not be entered into any database. The hard copy form will be in the possession of the band director and/or medical chaperones during band trips and at band camp. It will only be shared with emergency and medical professionals when necessary.

Student Name _____ Birth Date _____

Student Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Parent Email _____

*Father Name _____ Home Phone _____

Work Phone _____ Cell Phone _____

*Mother Name _____ Home Phone _____

Work Phone _____ Cell Phone _____

*Guardian (if applicable, please indicate)

Emergency Contact
(other than parents) _____ Home # _____

Work # _____ Cell# _____ Relationship to student _____

INSURANCE COVERAGE

Company _____ Group _____

Policy Number _____ Phone # of Ins. Co. _____

Policy Holder's Name _____

If there is a known history, please circle:

Allergy to bee stings

Asthma

Epilepsy/Seizures

Dizziness/Fainting

Diabetes/Hypoglycemia

High Blood Pressure

If student uses any type of inhalers or medicine to counteract allergies, make sure first aid chairperson has this on hand.

Please list any allergies or other health problems (including any surgeries in the past 6 months):

Allowed medications and dosages – Circle all that apply to your child:

ADVIL -	Yes or No	1 or 2	Benadryl 25mg	Yes or No	1 or 2
TYLENOL -	Yes or No	1 or 2	Tums	Yes or No	

My child is on the following prescription(s) or over the counter medications (list medication and dosage).

NOTE: Only medications listed on this form may be taken by the minor while under supervision of the MCHS Band Program. My (daughter/son) has my permission to receive any emergency treatment at the discretion of the Band Director or First Aid Representative, both diagnostic and definitive, which may become necessary during any band function for the 2010-2011 school year. This emergency treatment includes but is not limited to the administering of medications listed above.

Parent Signature _____ Date _____



WAKE COUNTY PUBLIC SCHOOL SYSTEM

Technology Services Division

TO: Parent/Guardian
FROM: John Enloe, Band Director, Middle Creek High School
SUBJECT: 2010/2011 Photograph / Name Release for Web Site Development

The Wake County Public School System is striving to maintain a high level of security for your child(ren) regarding web site development. Many schools wish to use individual photos or group photos in their web sites as well as a student's full name. These photos and names are used in many ways to highlight a child's school life.

The following is a request for your permission to use your child's photo and/or full name. Please complete the appropriate blank(s), sign and have your child return it to the designated staff member at his/her school by Sept 17, 2010.

Student's Name: _____

(No personal information such as home address or phone numbers will be provided on a web site.)

NAME RELEASE:

_____ I give permission for my child's full name to be featured on the World Wide Web.

_____ No. I do not give permission for my child's full name to be featured on the World Wide Web.

PHOTO RELEASE:

_____ I give permission for my child's photo or other illustrating materials to be featured on the World Wide Web.

_____ No. I do not give permission for my child's photo or other illustrating materials to be featured on the World Wide Web.

Parent/Guardian Signature

Date



PARENTAL CONSENT AND EMERGENCY INFORMATION FOR SCHOOL TRIPS

THIS CONSENT FORM IS TO BE SIGNED ONLY AFTER UNDERSTANDING AND AGREEING TO THE INFORMATION BELOW. IF THIS FORM IS NOT COMPLETED AND RETURNED PRIOR TO THE SCHOOL TRIP, THE STUDENT WILL NOT BE PERMITTED TO PARTICIPATE AND WILL REMAIN AT SCHOOL IN A SUPERVISED ACTIVITY.

2010/2011 Band Events and Competitions

Trip or Activity Planned

Attached is an itinerary that includes the place or places to be visited, a daily schedule of activities, and the dates, times, and places of departure and return.

Band Performances and Competitions

Purpose of Trip or Activity

Name of Teacher/Sponsor

John Enloe

School

Middle Creek High School

Method of Transportation

WCPSS Activity Busses or Charter Busses

(WCPSS owned vehicle, charter bus/contract vehicle, *privately-owned vehicle)

*When privately-owned vehicles are used for transporting students, only the vehicle owner's liability coverage is applicable to any vehicular accident. When students are transported by vehicles owned by Wake County Public School System, the school system vehicle liability coverage is applicable to any vehicular accident.

Changes/Cancellations

I understand school trips may be cancelled when necessary by the principal, superintendent, or board of education. The school system cannot guarantee reimbursement when such cancellations occur. Parents/guardians will be notified of any significant change in plans prior to the school trip.

Expectations and Instructions

I understand the following is expected of the student.

- To follow instructions given by the teacher/chaperone.
Not to leave or separate from the group without appropriate authorization from a teacher/chaperone.
Comply with all school and district policies and rules of conduct.

In the event any of the above expectations or instructions are violated, I understand school officials reserve the right to remove the student from the trip and the student will be subject to school disciplinary consequences.

Insurance Coverage

I represent that the student has insurance either through the school system's student insurance program or through my own insurance carrier.

I REQUEST THAT THE BELOW-NAMED STUDENT BE ALLOWED TO PARTICIPATE IN THE TRIP PLANNED AND SPECIFICALLY CONSENT TO THE STUDENT'S PARTICIPATION.

Name of Student

Parent/Guardian Signature

Date

Student Signature (Grades 6-12)

Date

Special Conditions

If the trip includes water related activities (such as swimming, diving, boating, sailing, cruise ship travel, etc.) or participation on amusement park rides, I acknowledge the inherent risks in these activities and give my express permission for the student to participate in those activities.

I AGREE _____ DO NOT AGREE _____ TO THE ABOVE SPECIAL CONDITIONS.

Parent/Guardian Signature _____ Date _____

Parent/Legal Guardian Medical Emergency Authorization

In the event of a medical emergency while my child is participating in a school trip, I authorize Wake County Public School System officials to release the following information to the healthcare provider. I understand school officials will use the contact information provided below to contact me in the event of such emergency. If any emergency medical procedures or treatment are required during the trip, I consent to the trip supervisor(s) arranging for and consenting to the procedures or treatment in the supervisor's discretion. I will pay the costs of any such medical procedures or treatment.

Parent/Legal Guardian Signature _____ Date _____

Emergency Contact Information

1st Choice

2nd Choice

Name: _____

Phone: _____
(Day) (Night) (Day) (Night)

(Mobile) (Mobile)

Emergency Medical Information (Please complete as applicable.)

Family Physician: _____ Phone Number: _____

Date of last tetanus booster: _____

My child is allergic to: _____

Medication taken routinely: _____

Special health needs: _____

Name of insurance company: _____ Policy #: _____

This form must be kept with school officials at all times during the school trip.

**MIDDLE CREEK HIGH SCHOOL
BAND BOOSTER CLUB AND COMMITTEES**

<http://www.middlecreekband.org/>

As long as our children are involved with activities, we'll never stop hearing, "This can't be done without you." Please note that these volunteer opportunities are important to both Concert and Marching bands. It would be appreciated if each of you could find a spot to become more involved with our bands. All of us have many responsibilities, but if we all pitch in, it makes it easier for all involved.

The MCHS Band Booster Club meets monthly in the band room. Please see the band web page listed above for dates and times of meetings. Thanks for taking the time to look this over. We look forward to working with you and appreciate your help.

Listed below are the 2010-2011 Executive Committee and Committee Chairs:

President	Amy Woynicz	<u>woynicz@mindspring.com</u>
Band Director	John Enloe	<u>jenloe@wcpss.net</u>
Vice President	Mark Iasiello	<u>miasello@nc.rr.com</u>
Secretary	TBD	
Co-Treasurers	Linda Lamb/Beth McFarland	<u>llamb@nc.rr.com</u> , <u>beth@themcfarlands.com</u>
Members at Large	Jill Bartruff, Debbie Shellabarger, Lori Seddon	<u>jill@bartruff.us</u>, <u>dshellabarger@bellsouth.net</u>, <u>lseddon@bellsouth.net</u>

EQUIPMENT/TRANSPORTATION – *(Marching Band and Concert/Symphonic Band)*

This committee is in charge of getting the band and all its equipment to the event and back home again. This involves loading and unloading instruments and getting rental trucks if needed. If you have a commercial driver's license and are available to drive a school bus for field trips, please let us know. **Committee Chair** – **Scott Shellabarger, dshellabarger@bellsouth.net**

CHAPERONES – *(Marching Band and Concert/Symphonic Band)*

School policy mandates one chaperone per ten students. We need a list of willing parents to chaperone various trips away from school. Chaperones at football games also help set up on game night, water the band during breaks, and help the band negotiate curbs when they march to the stadium.

Committee Chair – **Debbie Shellabarger, dshellabarger@bellsouth.net**

FUNDRAISING – *(Marching Band and Concert/Symphonic Band)*

This committee organizes our band fundraisers, including getting the product to the students to sell, collecting the orders and money, getting the product back to the students to distribute, organizing car washes and the annual yard sale, etc. This committee also solicits patron donations. Patron support raises money for the band's general fund, which helps keep fair share costs low.

Committee Chair – **Mark Iasiello, miasello@nc.rr.com**

UNIFORMS – *(Marching Band)*

This committee is in charge of our uniforms. This includes the fitting our students and hemming pants or sleeves, getting the uniforms to the cleaners and back again (usually once per year), re-hanging uniforms and putting away hats, and doing any repairs.

Committee Chair – **Paige Ferguson, pferguson@nc.rr.com**

BAND CAMP – *(Marching Band)*

This committee organizes and prepares for band camp. This includes collecting the required paperwork, organizing camp volunteers, and supplying snacks and drinks for marching band camp and events.

Committee Chair – **Lori Seddon, lseddon@bellsouth.net**

CONCESSIONS - (Marching Band)

We have been given permission from the Stampede Club to have a concession stand on the visitor's side of the field during our home football games. We need volunteers to coordinate the purchase of supplies, set up the concession tent and sell items.

Committee Chair – Penny Goodman, pennyb@nc.rr.com

PROPS – (Marching Band)

These are the folks that build props for our half time/competition show and arrange for volunteers to set the props on the field during these events.

Committee Chair – Chris Meyer, rmeyer@siemens.com

COLOR GUARD – (Marching Band)

This committee coordinates props and costumes for the color guard and makes sure color guard students who are not in band class stay “in the loop”.

Committee Chair – Marilyn Iasiello, miasello@nc.rr.com

PUBLICITY – (Marching Band and Concert/Symphonic Band)

This volunteer will submit photos and articles to the local newspaper to publicize the band's accomplishments. We also need this person to publicize the band and its events with local middle schools.

Committee Chair – Carol Beaver, caroldoug@bellsouth.net

COMMUNICATION – (Marching Band and Concert/Symphonic Band)

This committee keeps parents and the school community informed. They keep the **web site** updated; organize the email lists and forward communications from Mr. Enloe. This committee also coordinates and prints a directory of student contact information.

Committee Chair – Christa Meyer, ccmhmeier@nc.rr.com

FIRST AID – (Marching Band and Concert/Symphonic Band)

This committee coordinates first aid volunteers for all events and ensures our supplies are adequate and up to date. A CPR certified volunteer is required at our camps, events, concert band and marching band competitions.

Committee Chair – Mark Craver, mark.craver@sas.com

HOSPITALITY – (Marching Band and Concert/Symphonic Band)

This committee organizes about five events throughout the school year. Volunteers are needed to plan, set up and clean up after receptions. This committee also provides snacks and drinks for marching band camp and competitions.

Committee Chairs – Jill Bartruff, jill@bartruff.us

We are always open to new ideas and all suggestions. If you can think of anything that would benefit our MCHS Band that is not mentioned here, feel free to let any of us know. Thanks again for volunteering and helping us make this a high quality band experience for our students!

**MIDDLE CREEK HIGH SCHOOL
BAND BOOSTER CLUB AND COMMITTEES**
<http://www.middlecreekband.org/>

PARENT VOLUNTEER FORM

Parent's Name _____

Student's Name _____

Parent's Email Address _____

Parent's Cell Phone Number _____

I will volunteer for the following committee(s):

I am willing to chair this committee: _____

I am CPR and/or First Aid Certified: YES NO

I am willing to take a First Aid Certified refresher course if I plan to chaperone or assist at practices:

 YES NO

You may also email this information to Amy Woynicz at: woynicz@mindspring.com or any of the committee chairs listed on the Band Booster Club and Committees page.