



May 13, 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). Marching Band packets must be filled out and returned to school to my attention by **July 9th** in order to ensure that a marching band t-shirt is ordered for each marching student.

Students will **not** be able to attend band camp in July without having turned in the proper medical and permission forms and paid the deposit. Returning students may also put completed forms and deposit in the black mailbox in my office before the end of the school year.

Concert Band packets will be distributed in August when school starts and must be returned by Friday, August 27, 2010.

If you have received the wrong band forms or you change your band course enrollment during the summer, please email Amy Woynicz at woynicz@mindspring.com by July 9th. 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>

Marching Band REGISTRATION FORM

MIDDLE CREEK HIGH SCHOOL BAND 2010-2011

Returning or New (*check one*) MCHS Marching Band Member

Student Name _____ Birth Date _____

Student Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Student Cell # _____

E-Mail (Student) _____

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

*Father Name _____ E-Mail _____

Home Phone _____ Work Phone _____ Cell Phone _____

*Mother Name _____ E-Mail _____

Home Phone _____ Work Phone _____ Cell Phone _____

*Guardian (if applicable, please indicate)

2010-2011 Class Rank (circle one): Freshman Sophomore Junior Senior

Marching Band Instrument or Color Guard _____

Student t-shirts (one) are provided by the MCHS Band Boosters. If a parent(s) would like to order one also, they will need to include \$12 for each t-shirt at the time the order is placed. Please make checks made payable to MCHS Band Boosters. If you would like to order a second band shirt (\$12.00) for your child, please do so below – remember the first one is provided by the band.

Student Name _____ Instrument/Guard _____

Camp T-Shirt Size (comes in Men's Adult) Please circle one S M L XL XXL

Parent Name _____ Size S M L XL XXL

Parent Name _____ Size S M L XL XXL

Student Name (second shirt) _____ Size S M L XL XXL

Preparation for Marching Band Camp

How to Prepare:

You are athletes in training, so you need to treat your body to proper nutrition, sleep, and hydration, especially during the intense training at band camp. If your body is starved of these important things, your performance will suffer and you may experience problems such as heat exhaustion, fainting, decreased concentration, and weakness.

Hydration:

Start drinking fluids days before band camp (as well as competitions), especially in hot weather. Water, fruit juice, or Gatorade type drinks are good choices. Soda may contain sodium and does NOT do an effective job. During camp you will have frequent water breaks to replenish the fluid you will be losing. You **MUST** drink during these brief breaks.

Dehydration and Heat Exhaustion:

These are serious conditions and may be prevented. **Dehydration** means your body does not have the fluid it needs to maintain normal bodily functions. Early symptoms are dry mouth, headache, lightheadedness; thirst may or may not be present. **Heat Exhaustion** is also serious and means your body is overheating and cannot cool itself properly. Symptoms include increase in body temperature, absence of perspiration, nausea, fainting, weakness, and probably thirst. **These conditions can be very serious. Please seek immediate help from the medical staff/chaperones if you are experiencing the above-mentioned symptoms.**

Exercise:

Marching while playing an instrument takes endurance. Your body needs to be in good cardiovascular shape. Get in condition NOW, prior to starting band camp, to maintain good performance. Walking, swimming, biking, and hiking are good ways to increase your heart rate. Before band camp, start getting conditioned to working out in the heat. Living in air-conditioned comfort all summer then stepping out into the July/August mid-day sun for band camp is a **tough** adjustment.

Diet:

You must eat breakfast before coming to camp each morning. Your body will need the calories. Avoid salty foods. Eat a variety of foods.

Medical:

All campers must provide completed, up-to-date medical forms (in this packet). If students use an inhaler, the student must carry his/her inhaler at all times – especially on the field. Please consider bringing a spare inhaler that can be given to the medical chaperone. Students who have food or bee sting allergies should also carry an epi-pen with them if it is warranted and provide a spare for the medical chaperone. ALL prescription medications must be properly labeled with name and dosage. No student is allowed to give any other student over-the-counter medication.

Get your sleep!

Please prepare yourself physically and mentally for band camp. Everyone needs to be able to perform at his or her maximum level. Band Camp is the foundation of the marching season. So, please prepare by exercising, getting plenty of rest, eating well, and drinking plenty of water before and during band camp.

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 # _____ Parent E-mail _____

Parent/Guardian Name(s) _____

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 Marching 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 \$650 for the 2010-2011 season associated with each member of the marching band (including color guard) and \$325 per each additional sibling per year. I understand and will adhere to the payment date schedule as delineated on the fair share schedule.**
- I understand that any past (2009-2010) band commitments must be paid in full before my student will be allowed to participate in the 2010-2011 season.
- I understand that if the band travels overnight, my student will be allowed to participate only if they are up-to-date on their fair share payments.
- 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 Marching band in 2010-2011.

Student's Signature _____ Date _____

Parent/Guardian's Signature _____ Date _____

What is “Fair Share”?

Fair Share money is used for items such as, but not limited to:

- Sectional Specialists & Clinicians throughout the year
- Music scores and Marching Band Drills
- Instruments, instrument supplies and repairs
- Band Camp instructors and choreographers
- Contest and entry fees
- Travel (rental trucks, gas and bus drivers)
- Uniform expenses (dry cleaning, alterations, repairs)
- Leadership Camp Scholarships for Drum Major and Field Commander
- Student awards and plaques

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.

The Fair Share Dues for 2010-2011 school year are:

Cost for one student \$650.00

Cost for two students (siblings) \$975.00

Cost for three students (siblings) \$1300.00

<u>Payment Schedule</u>	<u>1 student</u>	<u>2 students</u>	<u>3 students</u>
Non-refundable deposit due July 9 with the completed forms	\$75.00	\$150.00	\$225.00
Payment 1 – due August 1	\$200.00	\$325.00	\$430.00
Payment 2 – due September 15	\$200.00	\$325.00	\$430.00
Payment 3 – due October 25	<u>\$175.00</u>	<u>\$175.00</u>	<u>\$215.00</u>
Total	\$650.00	\$975.00	\$1300.00

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. Additionally, if you would like to pay more in July to reduce the amount due in August-September, we are more than happy to accommodate this type of payment. 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.

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.

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 July 9, 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.

Trip or Activity Planned 2010/2011 Band Events and Competitions
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.

Purpose of Trip or Activity Band Performances and Competitions

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		
Co-Treasurers	Linda Lamb/Beth McFarland	<u>lm1amb@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.