

2024-2025 RICHARDSON GOLDEN EAGLE BAND

ACKNOWLEDGEMENT FORM

This Handbook is provided for your information. We hope it will make your experience in the Richardson High School Band as beneficial as possible. Organizational information, descriptions and schedules are covered in this Handbook. Please read them and sign the following acknowledgement form and return it to the band office. All forms must be on file before the first day of school. If you have any questions, please contact Mr. Marquez at jesus.marquez@risd.org for more information.

Student's PRINTED Name: _____

**THIS IS TO CERTIFY THAT I HAVE RECEIVED AND READ THE
2024-2025 RICHARDSON HIGH SCHOOL BAND HANDBOOK AND
WILL OBSERVE ALL GUIDELINES FOUND THEREIN.**

RHS GEB Student Signature

Date

**I HAVE RECEIVED AND READ THE 2024-2025 RICHARDSON HIGH
SCHOOL BAND HANDBOOK AND UNDERSTAND HOW IT APPLIES
TO MY BAND STUDENT.**

RHS GEB Parent/Guardian Signature

Date

MEDIA PUBLICATION RELEASE

I grant permission for RISD Fine Arts to identify me by name or likeness or both in campus or RISD publications, either printed or electronic.

Accept Decline

RISD Student PRINTED Name

RISD Student Signature

I grant permission for RISD Fine Arts to identify my above-named child by name or likeness or both in campus or RISD publications, either printed or electronic.

Accept Decline

RISD Parent/Guardian PRINTED Name

RISD Parent/Guardian Signature

**2024-2025 Extracurricular Activity Acknowledgment
and Agreement Form**

Student Statement:

My signature below certifies that I have read and understand the RISD District-Wide Guidelines for Extracurricular Students. I agree to comply with all rules and regulations in these guidelines and any additional rules adopted by my school as a condition of participation as a member of an extracurricular activity. I understand that my failure to comply with these guidelines may result in disciplinary action, including dismissal from all extracurricular activities.

Printed Name of Student

Student Signature

Date Signed

Parent/Legal Guardian Statement (for students under 18 years of age):

My signature below certifies that I have read and understand the RISD District-Wide Guidelines for Extracurricular Students. I understand that my student must comply with all rules and regulations written in these guidelines and any additional rules adopted by my student's school as a condition of participation in an extracurricular activity. I understand that his or her failure to comply may result in disciplinary action, including dismissal from all extracurricular activities.

Printed Name of Parent or Legal Guardian

Signature of Parent or Legal Guardian

Date Signed



RISD Fine Arts Department Authorization and Release for Student Travel

General Information

Throughout the year, your student's Fine Arts program may travel locally or out of the local area to performances, competitions, enrichment opportunities etc. Your student is eligible to attend if you choose to allow the student's participation. These trips are designed for enrichment, entertainment, and/or curriculum enhancement and your student's participation is completely voluntary. If a trip involves travel out of the local area, students will be responsible for meeting all financial commitments for the trip. Students represent the Richardson Independent School District and their school at all times. Student participation in this trip or any other activity is conditioned upon the student's compliance with all applicable rules and policies before and during the activity. Any student who engages in inappropriate behavior while away from RISD on a school-sponsored trip is subject to immediate removal from the activity at the parents' expense in addition to any other school discipline which may be administered.

This form provides basic information about the trip and seeks to gather important information about your student that is necessary during the trip. The activity sponsor will provide more detailed information and you will have the opportunity to ask questions to ensure you make a fully informed decision about your student's participation in this activity.

Please carefully read and complete all information requested on this form. Incomplete forms may delay your student's approval for the activity.

Student and Parent /Guardian Information *(Please print legibly and provide all requested information)*

Student's Full Name _____ DOB _____

Student's Address _____

Student Mobile Telephone # _____ Student Home Telephone # _____

Name(s) of Student's Parent(s)/Legal Guardian(s) _____

Address (if different from student) _____

Mother's Telephone Contact #s (Home, Mobile, Work) _____

Father's Telephone Contact #s (Home, Mobile, Work) _____

Name/Contact #s for Alternate Adult (Emergency Contact) _____

Name/Contact #s for Alternate Adult (Emergency Contact) _____

PRINTED Student Name: _____

PARENT/LEGAL GUARDIAN AUTHORIZATION & RELEASE

My signature below certifies that I (i) am the parent/legal guardian of the student named in this form and that I have full legal authority to make decisions concerning this minor child, (ii) have carefully completed the information requested on this form and the information is true and complete, (iii) have familiarized myself with the school-sponsored activity described in this form and I have had an opportunity to ask questions about any aspect of the activity, and (iv) authorize my student named herein to participate in the described activity, including the use of transportation through common carriers or other public or private means. I understand that the Richardson Independent School District and its employees will take reasonable steps to ensure the activity is conducted in a safe and responsible manner but I further understand and agree that my student could be injured or sustain other damage or loss. In consideration of the work by the Richardson Independent School District and its employees to plan and sponsor this trip and to allow my student to participate, on my own behalf and on behalf of my minor student named herein, I hereby release and hold harmless the Richardson Independent School District and its trustees, employees, agents, assigns, and volunteers from any claims or causes of action, including negligence, resulting from any damages, injuries, or other loss to my student, to me, or my family, arising out of or resulting from my student's participation in this trip.

In the event that my student is presented for or requires medical treatment or surgery or any other form of medical care or aid, I do hereby authorize the trip sponsors/chaperones to provide consent for my student to obtain such care and I authorize any medical provider to communicate or consult with such sponsors or chaperones about my student's medical treatment, including disclosing my student's protected health information. I understand that I am responsible for payment of all costs or charges related to medical treatment my student receives such as, but not limited to physician, hospital, x-ray, lab, drugs, and EMS.

Signature: _____ Signature: _____

Date Signed _____ Date Signed _____

Health-Related Information

1. List allergies to food, medications, other. (If None, state NKA.)

2. Describe all major health concerns and illnesses (e.g., diabetes, epilepsy, allergies, heart issues, etc.) (If None, so state.)

3. Will the student be required to take any medication on the trip? If yes, describe. If no, so state.
List medication(s), their purpose, mode of administration, and any assistance the student requires

4. Date of last Tetanus injection:

5. Name/Address/Phone of family physician:

6. Does student wear (yes/no): glasses? _____ contact lenses? _____ hearing aid? _____ other assistive device? _____

7. Additional medical information or comments:

Insurance Coverage – Please attach a copy (front and back) of any medical and/or dental insurance card(s) under which the student is covered. Identify which carrier provides the primary coverage, if applicable.

Name of Parent who is the Policy Holder: _____

**PARENT/STUDENT UIL MARCHING BAND
ACKNOWLEDGEMENT FORM**

Updated 2018

No student may be required to attend a marching band related practice for more than eight hours outside the academic school day per calendar week (Sunday through Saturday). This provision applies to students in all components of the marching band. **Exception:** For schools that begin instruction prior to the fourth Monday in August the limit of eight hours of rehearsal outside of the academic school day per calendar week shall begin on the Tuesday immediately following Labor Day. Schools under this exception shall be limited to eight hours of rehearsal outside of the academic day per school week (12:01 AM on the first day of school of the calendar week through the end of the school day on the last day of instruction of the school week) until the Tuesday immediately following Labor Day.

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. 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
- Passing 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: More information about Marching Band practice limitations can be found at:
www.uiltexas.org/music/marching-band

“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 _____

This form is to be kept on file by the local school district.