

Welcome to the Carson High School Band Family,

We are excited you are considering membership in our program, and we look forward to the opportunity of working with you over the coming years as you look at joining our program. In our eleven-year history, the Jesse C. Carson High School Band's name has become synonymous with excellence and we look forward to continuing that tradition in years to come.

Our families have come to trust and rely on our program to foster a love of music within our band members, but more importantly to prepare our band members for life by developing the character of our young performers. Band members at Carson High School learn the value of teamwork, the importance of commitment and dedication, the benefits of setting goals and creating systems to achieve them, coping skills to handle both successes and failures, and of course...how to work hard as a family.

The benefits of membership allow band members to grow as individuals while participating in an activity that they love. It is a win-win combination, and while undoubtedly you may have questions about time commitment, academics, cost, and other like concerns, we hope to answer these questions through open communication in the coming months, starting with our website at: carsonhsband.weebly.com

Please look over the enclosed forms, especially the fair share commitment form, and return them to Mr. Street so that we may save you a spot in our award-winning program.

Please contact the band room at (704) 855-7297 if you have any other questions.

Musically,

Jeff Street

Jeff Street
Band Director
Jesse C. Carson High School Bands

2017 Marching Band Summer Schedule

Monday, July 31st	Color Guard, Drumline, Rookies, Student Leaders	12:00PM-2:00PM
	Full Band	3:00PM-10:00PM
August 1st	Color Guard, Drumline, Rookies, Student Leaders	12:00PM-2:00PM
	Full Band	3:00PM-10:00PM
August 2nd	Color Guard, Drumline, Rookies, Student Leaders	12:00PM-2:00PM
	Full Band	3:00PM-10:00PM
August 3rd	Color Guard, Drumline, Rookies, Student Leaders	12:00PM-2:00PM
	Full Band	3:00PM-10:00PM
August 4th	Color Guard, Drumline, Rookies, Student Leaders	12:00PM-2:00PM
	Full Band	3:00PM-10:00PM
August 5th	Full Band	9:00AM-NOON
August 8th and August 10th	Full Band	5:30PM-9:00PM
August 15th and August 17th	Full Band	5:30PM-9:00PM
August 18th	First Football Game vs. South	7:30PM

2017 Marching Band Fall Schedule

Date	Event	Place	Time
August 18th	Football vs. South Rowan	HOME	7:30PM
August 25th	Football vs. Salisbury (Endowment)	AWAY	7:30PM
September 1st	Football vs. AL Brown	HOME	7:30PM
September 8th	Football vs. North Rowan	AWAY	7:30PM
September 15th	Football vs. Davie County	HOME	7:30PM
September 22nd	Football vs. Central Cabarrus	HOME	7:30PM
September 23rd	Rowan County Preview Show	TBA	
September 29th	BYE WEEK		
October 6th	Football vs. North Iredell	AWAY	7:30PM
October 7th	Competition or work the Nascar Race	TBA	
October 13th	Football vs. East Rowan	AWAY	7:30PM
October 14th	Competition	TBA	
October 20th	Football vs. Statesville	HOME	7:30PM
October 21st	Competition	TBA	
October 27th	Football vs. West Rowan	HOME	7:30PM
November 2nd	JV Football vs. South Iredell	HOME	7:30PM
November 10th	Veterans Day Parade	TBA	
November 21st	Southern Rowan Christmas Parade	TBA	
December 9th	Kannapolis Christmas Parade	TBA	

CARSON HIGH SCHOOL MARCHING BAND INFORMATION SHEET

NEATLY PRINT ALL INFORMATION

Student Name: _____

Instrument: _____

Address: _____

City, State, Zip: _____

Home Phone: _____

Student Cell Phone: _____

Student E-Mail: _____

Mother Cell Phone: _____

Mother E-Mail: _____

Father Cell Phone: _____

Father E-Mail: _____



STUDENT EMERGENCY INFORMATION

Student's Name: _____ Birthdate: _____

Physical Address: _____

Mailing Address: (if different from above) _____

Home Phone: _____ Teacher/Grade: _____

Parent/Guardian or Legal Custodian's Name: _____

Workplace: _____ Work Phone: _____ Ext. _____

Cell Phone: _____

Parent/Guardian or Legal Custodian's Name: _____

Workplace: _____ Work Phone: _____ Ext. _____

Cell Phone: _____

List 2 neighbors or relatives who can assume temporary care of your child if you cannot be reached:

1. Name: _____ Phone: _____

Address: _____

2. Name: _____ Phone: _____

Address: _____

Name of student's doctor or clinic: _____ Phone #: _____

Serious Health Condition: _____

List any medications taken daily or medication needed in a medical emergency: _____

Medical Information/Conditions:

Condition	Medication Required
<input type="checkbox"/> ADD/ADHD	<input type="checkbox"/> Yes
<input type="checkbox"/> Severe Allergies requiring Epipen	<input type="checkbox"/> Yes
<input type="checkbox"/> Other Allergies _____	<input type="checkbox"/> Yes
<input type="checkbox"/> Insects <input type="checkbox"/> Food <input type="checkbox"/> Medication <input type="checkbox"/> Inhalants <input type="checkbox"/> Seasonal _____	<input type="checkbox"/> Yes
<input type="checkbox"/> Arthritis	<input type="checkbox"/> Yes
<input type="checkbox"/> Asthma	<input type="checkbox"/> Yes
Date of last asthma attack: _____	<input type="checkbox"/> Yes
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Yes
<input type="checkbox"/> Frequent Nose Bleeds	<input type="checkbox"/> Yes
<input type="checkbox"/> Heart Problems	<input type="checkbox"/> Yes
<input type="checkbox"/> Hemophilia/Bleeding disorder	<input type="checkbox"/> Yes
<input type="checkbox"/> Orthopedic Problems	<input type="checkbox"/> Yes
<input type="checkbox"/> Psychiatric Disorder	<input type="checkbox"/> Yes
<input type="checkbox"/> Seizures	<input type="checkbox"/> Yes
Date of last seizure: _____	<input type="checkbox"/> Yes
<input type="checkbox"/> Sickle Cell Disease	<input type="checkbox"/> Yes
Date of last crisis: _____	<input type="checkbox"/> Yes
<input type="checkbox"/> Other _____	

I will notify the school of any changes. In case of a medical emergency, injury or serious illness, I hereby authorize school personnel to take or send my child to the emergency room. I realize the Board of Education cannot assume responsibility for the cost of treatment or transportation of the student as a result of illness or injury.

Parent/Guardian Signature

Date

Permission to Travel & Medical Release Form

2017 Marching Band Season

Name of Student: _____

Birthdate: ____/____/____

Name of Parents: _____

Home Phone: () _____

Mother's Work Phone: () _____

Father's Work Phone: () _____

I give my child permission to travel with the Carson High School Marching Band on all school sponsored band trips and activities during the 2017-18 school year.

In the event that reasonable attempts to contact me at the above phone numbers are unsuccessful, I authorize Mr. Jeff Street, band director, and/or supervising school staff or parent sponsors to seek medical treatment for my child. I hereby give my consent for the administration of any treatment deemed necessary by a licensed physician or dentist; and the transfer of my child to any hospital reasonably accessible. This authorization does not cover any major surgery unless the medical opinions of two licensed physicians or dentists, concurring it necessity for such surgery is obtained prior to the performance of such surgery. I have listed on the medical form any special medical conditions, allergies, prescribed medications, or other pertinent information that would aid in the treatment of my child.

Parent/Guardian Signature

Date

Parent/Guardian Signature

Date

Additional Comments: _____

Marching Band Fees Information Sheet

Item	Cost	Total
<i>2017 Marching Band Fee</i>	\$250.00	
<i>Color Guard Fee</i>	\$50.00	
<i>Percussion Fee</i>	\$50.00	
<i>Marching Band Shoes (If needed)</i>	\$25.00	
<i>Marching Band Jacket (Optional)</i>	\$50.00	
<i>DISNEY Trip</i>	\$850.00	
<i>JCHS Instrument Rental Fee</i>	\$25.00	
<i>Total</i>		\$

Explanation of fees:

The marching band fee is for all students that are going to march in the fall of 2017

The color guard fee is for all students that are members of the color guard only and is in addition to the marching band fee

The percussion fee is for all drummers and sideline percussion members in addition to the marching band fee

The marching band shoes fee is for all students that need new shoes for marching band

The marching band jacket fee is optional but strongly recommended. This will be the official jacket worn by all band members in the stands at football games, competitions and parades.

The Disney fee is for any student that is interested in going on the trip to Disney in the summer of 2018. We will be marching in the Magic Kingdom.

The JCHS Instrumental rental fee is for anyone that is going to play a school owned instrument (not percussion) for the upkeep and cleaning of the instrument during use.



Sign up for important updates from Mr. Street.

Get information for **Jesse C Carson High School** right on your phone—not on handouts.

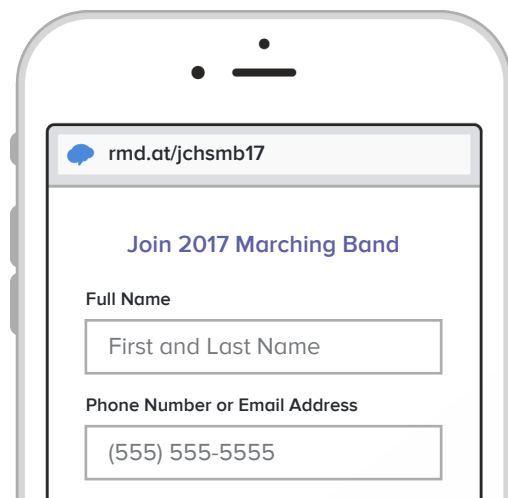
Pick a way to receive messages for **2017 Marching Band**:

A If you have a smartphone, get push notifications.

On your iPhone or Android phone, open your web browser and go to the following link:

rmd.at/jchsmb17

Follow the instructions to sign up for Remind. You'll be prompted to download the mobile app.



B If you don't have a smartphone, get text notifications.

Text the message **@jchsmb17** to the number **81010**.

If you're having trouble with **81010**, try texting **@jchsmb17** to **(832) 241-5357**.

** Standard text message rates apply.*



Don't have a mobile phone? Go to rmd.at/jchsmb17 on a desktop computer to sign up for email notifications.



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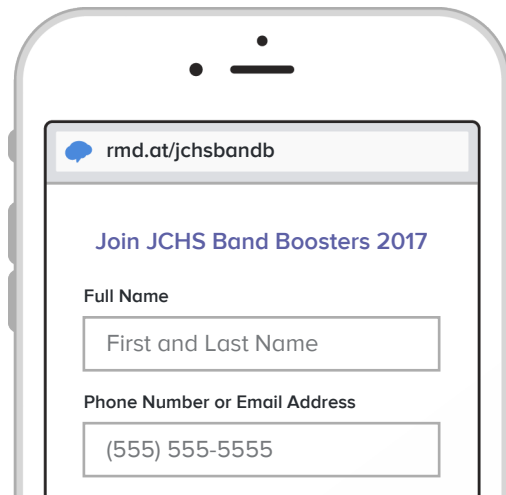
Pick a way to receive messages for **JCHS Band Boosters 2017**:

A If you have a smartphone, get push notifications.

On your iPhone or Android phone, open your web browser and go to the following link:

rmd.at/jchsbandb

Follow the instructions to sign up for Remind. You'll be prompted to download the mobile app.



B If you don't have a smartphone, get text notifications.

Text the message [@jchsbandb](https://www.remind.com/help/faq/what-is-a-remind-message) to the number **81010**.

If you're having trouble with **81010**, try texting [@jchsbandb](https://www.remind.com/help/faq/what-is-a-remind-message) to **(832) 241-5357**.

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