

Paredes Middle School Band  
Band Trip Authorization &  
Media Release  
2019 – 2020 SCHOOL YEAR



**Student Name:** \_\_\_\_\_

“I hereby give consent for the above named student to go on school sponsored trips (e.g. football games, contests, concerts, music festivals, etc) with the band, band director, and/or approved volunteers. I also give my consent for school employees to secure emergency first aid or medical services for the above named student. I release Austin Independent School District and all accompanying school authorities and chaperones from all responsibility pertaining to claims and expenses in the case of accident, injury, or loss of life that might occur. I understand that all reasonable precautions will be taken to insure the safety of my child during this activity.”

I do hereby grant to Austin Independent School District the unlimited right to use and/or reproduce photographs, likenesses or the voice of my child in any legal manner and for the internal or external promotional and informational activities of Austin Independent School District. I also agree to allow my child to be interviewed and/or photographed by representatives of the external news media in relation to any and all coverage of Austin Independent School District in which they are involved. I also agree to allow my child's work and/or photograph to be published on the Austin Independent School District Web Pages and/or AISD publications. I further understand that by signing this release, I waive any and all present, or future compensation rights to the use of the above stated material(s).

Student Information (Please print)

**Parent/Guardian** \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**Allergies** (drug and/or food) \_\_\_\_\_

**Medications taken regularly** \_\_\_\_\_

**If a parent cannot be reached, who should we contact?**

| Name  | Relation | Phone |
|-------|----------|-------|
| _____ | _____    | _____ |

|                                 |       |
|---------------------------------|-------|
| X _____                         | _____ |
| Signature of Parent or Guardian | Date  |

**Please turn the page over and sign the opposite side!**

I have read the Paredes MS Returning Member Band Handbook. I agree to follow the policies and procedures outlined in this manual.

StudentName: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

### **Parent Volunteers Needed**

All of the Paredes MS Band activities run much more smoothly with the help of our wonderful parent volunteers. If you would be willing to help the band program and your child by volunteering for various activities, please check the appropriate spaces below.

\_\_\_\_ Bus Chaperone (for festivals, trips, etc...)

\_\_\_\_ Chaperone for band social activities

\_\_\_\_ Provide food or drink for various activities

\_\_\_\_ Available during school hours to assist the band program with uniform fittings, alterations, money collection, paperwork, etc.

If available, what day/time is best for you? \_\_\_\_\_