



## Marching Band Commitment Form

The Circleville High School Marching Band is looking forward to an exciting competitive season this fall. In order to properly plan and receive our materials in time, we must know the number of marching musicians in each section. Please take a few minutes to review the provided summer rehearsal calendar and fall performance schedule. Then, complete the information below.

Marching Band requires a large time commitment through both the summer and fall. Your attendance at all rehearsals, football games, OMEA competitions, and performances is required.

**Every member of the ensemble makes a difference, and your participation is important to the ensemble and program as a whole!**

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

\_\_\_\_\_ YES, I will be a member of the Circleville High School Marching Band this summer and fall.

\_\_\_\_\_ YES, I understand the time commitment necessary and my importance to the overall program, and agree to attend all camps, rehearsals, and performances.

\_\_\_\_\_ YES, my family will volunteer when possible for the benefit of the students and the overall program.

\_\_\_\_\_ NO, I will NOT be a member of the Circleville High School Marching Band this summer and fall.

**Potential Conflicts**

---

---

*\*Continue to next page\**



## Marching Band Commitment Form

*Students participating in Fall sport must complete this section. Students not participating in a Fall sport can skip to the signatures at the end.*

### Fall Sports Participation

Sport: \_\_\_\_\_ Coach: \_\_\_\_\_

\_\_\_\_\_ YES, I understand that I am able to participate in both Marching Band and a Fall Sport.

\_\_\_\_\_ YES, I agree to provide the Directors a schedule of my athletic practices (what is known) and games/matches **in writing by no later than July 1**. Additionally, I understand I must communicate any changes in practices or events **in writing** as soon as possible.

\_\_\_\_\_ YES, I agree to split time between Marching Band rehearsals and athletic practices **as evenly as possible**, and will communicate this plan **in writing** to the Directors.

\_\_\_\_\_ YES, I understand it is my responsibility to make up on my own time what is missed due to an athletic practice or event.

\_\_\_\_\_ YES, I understand Marching Band performances (football games, competitions, etc.) take priority over an athletic practice.

---

### Signatures

Student: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

***Return this form to Mr. Espie by May 26, 2021!***