



COON RAPIDS MARCHING CARDINALS

2009 Registration Form for Band and Guard



Student's Name _____ Graduation Year _____ Instrument or Guard _____

Home Address _____ City _____ State MN Zip _____

Student E-mail: _____ Date of Birth _____ Age _____ Home Phone _____

Parent(s) or Guardian(s) (1)
Day (Business Phone) (Parent 1)
Cell Phone (1)
Parent (1) E-mail

Parent(s) or Guardian(s) (2)
Day (Business Phone) (Parent 2)
Cell Phone (2)
Parent (2) E-mail

May we include name, address, phone number in a printed directory of the full band?
 Yes No

Please indicate any known conflicts with the published practice and performance schedule: _____

STUDENT PARTICIPATION FEES	
The amounts shown in the payment schedule are due as stated <i>whether or not you complete the season.</i>	
<p>The full fee is \$200 payable in installments of \$50</p> <p>Payment #1 (\$50) due June 15, 2009</p> <p>Payment #2 (\$50) due July 15, 2009</p> <p>Payment #3 (\$50) due August 15, 2009</p> <p>Payment #4 (\$50) due September 15, 2009</p> <p>Additional Activity Fee (approx. \$234) will be due to the school district Aug. 15. You are responsible for this on your own. Fee may vary if student is getting free or reduced lunch.</p>	<p>Option B</p> <p>Take advantage of Centerplate fundraising opportunities, staying reasonably on track with payment schedule. U-nights and other fundraising opportunities also available; participation in fundraisers may lower your band fee.</p> <p><i>Accounts must be kept current.</i></p>
<p>Clothing:</p> <p>One program shirt is included in registration fee.</p> <p>Shirt Size: <input type="checkbox"/>S <input type="checkbox"/>M <input type="checkbox"/>L <input type="checkbox"/>XL <input type="checkbox"/>XXL (check one)</p>	<p>Gloves and Shoes (Please Select)</p> <p>GLOVES: <input type="checkbox"/>S <input type="checkbox"/>M <input type="checkbox"/>L <input type="checkbox"/>XL</p> <p>(Gloves required for everyone except percussion and frontline. 1 pair included with band fee).</p> <p>Extra Band Gloves – Qty _____ @ \$3.00</p> <p>Band Shoes – Size & Width _____ @ \$28.00</p> <p>Guard Shoes - Size: _____ @ \$26.00</p> <p>Guard Gloves – Size: _____ @ \$12.00</p> <p>Shoe Bag (optional, recommended) @ \$4.00</p>
<p>Percussion Fee (to cover replacement of mallets, sticks, drum heads, etc). _____ \$25.00</p> <p>Frontline & Percussion ONLY</p>	
<p>Check payable to Marching Cardinal Boosters:</p>	<p>Total Amount Due: \$ _____</p>

I agree to pay the amounts listed above that are associated with my program. Should my account become delinquent, I understand that I may be prohibited from participating in practices and/or performances until my account becomes current. I also agree that, once practice has started, voluntarily choosing to no longer participate in the program does not relieve me of my financial obligation.

Student Signature: _____ Date: _____

Parent / Guardian Signature: _____ Date: _____



Coon Rapids High School Marching Band Confidential Health Report / Student Profile



Sex: M F

Student Name _____ Date of Birth _____ Age _____

Name of Health Insurance Co. _____ Insurer Phone # _____ Policy No. _____

Family Doctor _____ Dr. Phone _____ Hospital Choice (if possible) _____

In an emergency, if unable to reach parent/guardian, please contact:

Name _____ Relationship to student _____ Phone Number _____

Name _____ Relationship to student _____ Phone Number _____

Health History

Yes No Is the student taking any medication? _____
If yes, describe

Yes No Allergic Reactions? _____
If yes, describe

Yes No Diabetic? _____
If yes, type and dosage of medication

Yes No Asthma/Inhaler? _____
If yes, type and dosage of medication *Note: Students must have inhalers with them at all band functions.*

Yes No Recent exposure to contagious disease? _____
If yes, explain

Yes No Sleepwalking? _____
If yes, explain

Yes No Fainting? _____
If yes, explain

Yes No Permission given for staff to administer over the counter painkiller?
 Acetaminophen
 Ibuprofen
 Benadryl (antihistamine)
 Other (*Please indicate*)

Date of last Tetanus Booster: _____

Any other information or directions from parents: _____

This health history is correct, so far as I know, and the person herein described has permission to engage in all trip activities except as noted by me.

In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the Music Director to hospitalize, secure proper treatment for, and to order injection, anesthesia, or surgery for my child as named on this form. I further agree to release all Anoka-Hennepin Music Department members and sponsoring organizations from all claims or demands for myself and on behalf of my children, against said sponsoring Anoka-Hennepin Music Department members and organizations, their members, agents, representatives, or employees for any personal injury and/or property damage that may be suffered.

Parent / Guardian Signature: _____ Date: _____

Please resubmit an updated form in the event that any changes occur!

What special skills, abilities & talents do you have? Please select and return with your student's registration form.

Here are some examples of skills you may have and how they might be applied:

Wood working

- Props
- Enhance trailer (create equipment racks)
- Carts (as needed)

Sewing/Clothing

- Guard flags
- Organize & Maintain
 - Summer Uniforms
 - Marching Band Uniforms
 - Winter Drumline Uniforms or Guard Flags

Creativity

- Memory Books
- Shirt Design
- You are the creative one, what else?

Painting

- Floor painting (drumline)
- Props & equipment (as needed)

Activity Planning

- Planning events such as banquet

Mechanical

- General Equipment Repair & upkeep
- Trailer Repair & upkeep

Driving

- Able to pull a trailer

Volunteer Organization

- Organizing Parades
- Trips
- Parties
- Recognition awards

Writing

- Inserts for show programs
- Public Relations (keep the press informed)
- Solicitation letters

Calling

- Call other bands for home show
- Calls to request community support

General Support

- Support parades (keep kids cool)
- Pit Crew (help get equipment on & off field in a timely manner)

Parent Name & Phone Number _____

Student Name _____

GROUND RULES FOR OUR SUCCESS



- 1) I agree to treat every member with the same high level of respect regardless of their age, race, sex, ability, financial status and creed.
- 2) I agree to be open to endless possibilities and to be a person of vision. I agree to change when the need arises and do what is best for the group. I agree to put the needs of the group ahead of my own, while maintaining my integrity in the process.
- 3) I agree to speak positively at all times and under all circumstances, remembering that I am representing Coon Rapids High School, whether I am in uniform or not.
- 4) I agree to keep conversations in this group confidential. When something is spoken in confidence with the group, it is to stay within the group. To build a strong team, we must trust each other.
- 5) I agree to speak what I believe, but in an appropriate manner at an appropriate time. I also agree to listen to and work to understand other people's beliefs. I will always allow others to speak fully and honestly.
- 6) I agree to handle challenges with the person who can do something about it. Complaining is non-productive and promotes negative attitudes – I agree to stop someone else in the group if they begin to complain. If I have a challenge with someone, I will talk with them face-to-face and with the intent to listen to their point of view and to work out a solution.
- 7) I agree to encourage those who need help and I agree to promote the success of the group.
- 8) I agree to complete the work assigned to me within the required time frame, or find someone that will, and to help others do the same. I also agree to put forth my best efforts at all times. (i.e. to give 100% all of the time)
- 9) I agree to work out any conflicts with the group's rehearsal schedule as quickly as possible. This will enable myself and others to focus on the tasks at hand. If I do need to miss a rehearsal, I will be responsible for finding out what I missed and what work I need to do to catch up to the rest of the group.
- 10) I agree to be accountable to everyone in the group for the above ground rules.

Signature

Date