

2021-2022
Smyrna High School Band Contract
and
Policy Agreement Form

I verify that I have received, read, and fully agree to the policies and guidelines set forth in the Smyrna High School Band Information packet. I acknowledge that I am fully aware of the time and commitment involved with a student being involved in the band program. And I do understand the importance of each student being present for practices and all performances, and the impact any absence has on the entire band. In addition, regular attendance and performances are major factors that affect a student's grades and credit for the course.

Student Name (Printed) _____

Student Name (Signed) _____ Date _____

Parent Name (Printed) _____

Parent Name (Signed) _____ Date _____

Parent E-mail _____ Parent Phone _____