



Cleveland High School Band Parent's Association
65 Glen Rd – PMB 195, Garner NC 27529

2018-2019 Membership & Volunteer Form

This form must be completed **EACH YEAR** and turned in **prior to the start of Band Camp**. Please print. All information below is required. Once the form is received, you will have access to the members website and receive email communication from the BPA and the Band.

Parent or Legal Guardian Name 1 _____

Parent or Legal Guardian Name 2 _____

Student(s) live with Mom Dad Other _____

Are there any current custody issues? No Yes (please attach details)

Parent/Guardian 1:

Address (Street, City, Zip) _____

Email Address: _____

Phone Cell: _____ Home: _____ Work: _____

Occupation: _____

Parent/Guardian 2:

Address (Street, City, Zip) _____

Email Address: _____

Phone Cell: _____ Home: _____ Work: _____

Occupation: _____

Student 1:

Name _____ Grade: 8 9 10 11 12

Cell Phone: _____ T-Shirt Size: _____

Email Address: _____ Birth Date: _____

Marching Instrument: _____ Concert Instrument: _____

Student 2:

Name _____ Grade: 8 9 10 11 12

Cell Phone: _____ T-Shirt Size: _____

Email Address: _____ Birth Date: _____

Marching Instrument: _____ Concert Instrument: _____

Acknowledgement and Release

I understand and acknowledge that the Cleveland High School Band Parent's Association, Inc. ("BPA") is a non-profit 501c(3) that solely supports the Cleveland High School Band programs. I understand that participation in the activities supported by the BPA may expose my child to risks of injury and damage to property and I assume any such risk that may arise there from. I accept full responsibility for all medical expenses for any injuries that may occur to my child or damage to my child's property that may occur by reason of his/her participation.

By signing this form, however, I hereby release the Cleveland High School Band Parent's Association, Inc., its Board members, directors, officers, agents, assigns, and volunteers ("released parties") from and against any and all claims, demands, actions, complaints, suits, or other forms of liability of whatever kind or nature, including reasonable attorney and expert fees, and including any and all negligence claims or causes of action, which may arise and which result from illness, personal injuries, property damage, death, or any other damages or injuries, not included herein, occurring during, arising out of, or as a result of my child's participation in the activities supported by the Cleveland High School Band Parent's Association, Inc. Accordingly, any liabilities arising from my child's participation are my sole responsibility.

I confirm that I have carefully read this ACKNOWLEDGEMENT and RELEASE and agree to its terms knowingly and voluntarily. I also confirm that I am the parent or legal guardian of the child or I am a student 18 years or older. This consent and release has been read and is understood by me.

Sign: _____ (SEAL) Date: _____

Sign: _____ (SEAL) Date: _____

Membership Type: (Descriptions can be found in the approved CHS BPA By-laws. *Copies of the relevant section are available by request.* Select one type only.)

I prefer membership in the CHS BPA as a: Voting Member Associate Member Volunteer
Parent/Guardian 1 Initials _____

I prefer membership in the CHS BPA as a: Voting Member Associate Member Volunteer
Parent/Guardian 2 Initials _____

I understand that from time to time our contact information will be shared with the BPA for improved communication purposes and volunteer opportunities. (The BPA does not provide any contact information to outside vendors or other organizations.)

Parent/Guardian 1 Initials _____ **Parent/Guardian 2 Initials** _____

I hereby grant CHS BPA permission to use my or my students' likeness in a photograph, video, or other digital media ("photo") in any and all of its publications, including web-based publications, without payment or other consideration.

I understand and agree that all photos will become the property of CHS BPA and will not be returned.

I hereby irrevocably authorize CHS BPA to edit, alter, copy, exhibit, publish, or distribute these photos for any lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photo.

I hereby hold harmless, release, and forever discharge CHS BPA from all claims, demands, and causes of action that I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

Parent/Guardian 1 Initials _____ **Parent/Guardian 2 Initials** _____

CHS BPA Committees

Place a 1 or 2 (Parent/Guardian 1 or 2) by the area(s) below to indicate your interest.

___ **Chaperone Coordinator:** Works with the Director of Bands and the BPA President to establish the number of chaperones needed for trips and events. Secures qualified chaperones for trips, competitions and home football games from among members and associate members. Coordinates efforts of chaperones while traveling. Anyone interested in chaperoning must be approved as a Johnston County Level II Volunteer.

I don't want to be the Coordinator, but I am interested in chaperoning. Initials: ___
I have completed a Johnston County Level II Volunteer form for 2018-19. Initials: ___

___ **Communications:** Ensures that timely information is distributed to the membership and the public consistent with the operations manual. Helps maintain and update the information on the website.

___ **Guard (Color / Winter):** Helps with all aspects of guard uniforms and coordinates sewing needs.

___ **Historian:** Maintains a record of all activities and public recognition of the band program's accomplishments through the collection and retention of photographs, newspaper articles, online recognition, etc., maintaining such records in a manner that they are easily retrieved.

___ **Hospitality:** Plans for and provides food/beverage services for band-related events. Within the allotted budget, ensures staff if provided for events requiring a social or hospitality function.

___ **Pit Crew:** Ensures transportation of equipment, props, and instruments to and from events. Helps get all equipment, props and instruments on and off field at all events.

___ **Prop Construction:** Works with the Director and Prop Master in all phases of prop design and construction for all units.

___ **Transportation/Travel:** Works with the Director of Bands and the BPA Board of Directors to coordinate all operational aspects of competition and performance travel needs (transportation, lodging, tickets, etc.) for students and staff.

___ **Uniform Coordinator:** Helps store, fit and assign uniforms to instrumentalists each school year. Recruits and coordinates a parent group to wash uniforms after each event. I am not interested in being the Coordinator, but I will help wash uniforms. Initials: ___

___ **Ways and Means subcommittees:** Ensures fundraising activities are made available and carried out for both general fund and student fair share accounts. Supports and ensures the financial success of the overall band program.

___ **Alumni Program:** Help build and support our program to keep our Alumni students and parents up to date and involved with the band program.

I am not interested in serving on a committee, but I can help with the following area(s):

___ Medical/First Aid ___ Driver (truck with trailer) ___ Other (please list):