

Catawba Ridge High School Band

2020-2021 Student Health History & Financial Responsibility Form

This form must be filled out completely by a parent or guardian. Please print or type. Include a copy of your insurance card.

_____	_____	_____	_____	_____	_____
Student Last Name	First Name	MI	Age	Birthdate	Gender

_____	_____	_____	_____
Home Address	City	State	Zip

_____	_____	_____
Parent/Guardian 1 Name	Relationship to Student	Cell Phone

_____	_____	_____
Parent/Guardian 2 Name	Relationship to Student	Cell Phone

_____	_____	_____
Emergency Contact	Relationship to Student	Cell Phone

_____	_____	_____	_____
Primary Physician's Name	Practice	Phone	Date of last Tetanus

Continue on backside if needed for the items below.

I give permission to administer the following over the counter medications:

____ Acetaminophen ____ Ibuprofen ____ Aspirin ____ Antacids ____ Imodium ____ Benadryl

List any medications being taken. Include Name, dosage and frequency. _____

List any allergies to medications, food, insect bites, etc. _____

List any health problems or dietary restrictions (vegetarian). Please describe. _____

Are there any restrictions to the student's activities? If so, please list and describe. _____

Authorization Statement for Participation and Medical Treatment

I hereby give authority to administer medical treatment, including surgery, in case of medical emergency. I also give permission to give first aid and administer over-the-counter medication as deemed appropriate. I understand all efforts will be made to contact me as soon as possible in the event my child needs serious medical attention. I further agree to be legally responsible for all bills incurred for medical treatment, which may not be covered by group insurance. I accept legal responsibility for receipt of fundraising merchandise signed for by my child. I fully understand I am legally responsible for any other expenses incurred by my child during his/her participation in band that are owed to Catawba Ridge High School or Fort Mill District Band Booster Club. I also give my permission for my child to participate on all school-sponsored band activities for the current school year including band camp and all school approved trips and agree to support all rules and regulations set forth by the school district, high school, principal, and band director.

Parent/Guardian: _____ Date: _____

NOTE: If you do not have insurance, please sign here to release the school/band from responsibility.

Parent/Guardian: _____ Date: _____

FORT MILL SCHOOL DISTRICT
PERMISSION, RELEASE AND HOLD-HARMLESS AGREEMENT

In consideration of the below named Student being allowed to participate in the following school events or activities, participation in which is hereby acknowledged to be voluntarily and in no way required of Student:

High School Band Co-Curricular activities during the 2020-2021 school year

I (Student), and, as applicable (if under age 18), my parent(s)/guardian(s), do hereby acknowledge, appreciate, and agree that:

I/we are aware there are risks to me of exposure to directly or indirectly arising out of, contributed to, by, or resulting from an outbreak of any and all communicable disease, including but not limited to, the virus “severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)”, which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof.

I, as the undersigned Student, do HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS Fort Mill School District, its Board of Trustees, officers, officials, agents and/or employees, (“RELEASEES”), from any and all claims, demands, losses, and liability arising out of or related to any ILLNESS, INJURY, DISABILITY OR DEATH I may suffer, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X _____

Student’s Name (Print)

Age

Date

X _____

Student’s Signature

FOR PARENT(S)/GUARDIAN(S) OF STUDENT OF MINOR AGE (UNDER AGE 18 AT TIME OF EXECUTION OF THIS AGREEMENT)

This is to certify that I/we, as parent(s)/guardian(s) with legal responsibility for Student, attest to the above statement of acknowledgement and appreciation of the risks of communicable disease and do hereby grant permission for Student to participate in the above-described voluntary events/activities and, further, consent and agree to his/her release as provided above of all the Releasees, and, for myself/ourselves, my/our heirs, assigns, and next of kin, I/we do hereby release and agree to indemnify and hold harmless the Releasees from any and all liability incidents or occurrences to or in regard to my minor child's involvement or participation in said events/activities as provided above, to the fullest extent permitted by law.

X _____
Parent/Guardian #1 Signature Date

X _____
Parent/Guardian #2 Signature Date

Catawba Ridge High School Band
Instrument Rental Agreement
2020-2021

Student Name: _____ Instrument: _____

Make/Model: _____ Serial Number: _____

Condition: _____

Students must pay a \$60 fee to use school-owned instruments for the school year. This fee only covers the use of the instrument. It does not cover damage. The instrument must be returned in the same condition as it was issued.

Instruments are rented “as is” and students must maintain instruments in the same condition less normal wear. We define “Normal wear” as zero to minimal damage to the body and working parts of the instrument. We define “excessive damage” as instruments with dents, scratches, blemishes on the instrument’s finish, bent or broken keys or rods, or missing parts (all demonstrating a lack of care in the handling of the instrument). In the event such damage exists, the parents/guardians will be billed appropriately for the full costs of such repairs and/or the cost to replace the instrument.

By signing this form, I assume liability for the instrument throughout the year. I also understand I am financially liable for any damage (accidental or otherwise) while the instrument is in my possession.

I agree to the above terms.

Parent/Guardian: _____
(Printed Name)

(Signature)

Student: _____
(Printed Name)

(Signature)