

2024 Band of Knights Commitment Form

This form is intended to help ensure that parents and students have a full understanding of the commitment involved in the Band of Knights and resources that are available with the proper communication. It is our mission to give our members an amazing experience that will help them grow as young adults and teach life skills that they will always use. Commitment, responsibility, team-work, integrity are qualities we encourage and cultivate from all of our members.

Our Commitment to you:

We the staff of the Band of Knights Commit to you to teach you every rehearsal to the best of our ability with compassion, understanding and a commitment to excellence and the growth of every member!

Matt Minick

Jennifer Burhans

It is important that both the student and the parent/guardian are committed to this process. Please read and initial each line;

Student initial Parent initial

_____	_____	We have read and completed the google form registration
_____	_____	We have reviewed the complete fall schedule
_____	_____	We understand that members are expected to be at all regular rehearsal with exception of summer rehearsals. You are asked to be at summer rehearsals unless you are out of town which should simply be communicated with Mr. Minick
_____	_____	We understand that excused absences for rehearsals include sickness, Family emergency, death in the family, etc. and need to be communicated with Mr. Minick prior whenever possible
_____	_____	We understand that we cannot sign up to take the drivers ed class during the marching band season. (Its two weeks long every day, no one can miss that much)
_____	_____	We understand that parents are asked to help out whenever possible. We do concessions at football games, the Roundtable Tournament of Bands, chaperoning, fundraising.
_____	_____	We understand there is a financial commitment and have read and reviewed that payment schedule for this year. We also know no child will be prohibited from participating because of financial restrictions. Please check the line below and leave your email address next to the box if you would like to be contacted about financial assistance.
		<input type="checkbox"/> Please contact me about financial assistance. Please include email address and or phone number

Parent signature

Student Signature

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