

STUDENT NAME (PLEASE PRINT) _____

INSTRUMENT _____ BAND CLASS _____

KLMS KNIGHT BAND STATEMENT OF UNDERSTANDING

Please initial I have read the information from the Kelly Lane Middle School Band Hand Book located on the CHARMS website (www.charmsoffice.com) and agree to abide by the stated policies.

Please initial I am aware that I can purchase instrument insurance through www.anderson-group.com/student.

Please initial I have logged on to the CHARMS website (www.charmsoffice.com) and updated my information.

Occasionally, we would like to post pictures of the students (from concerts, pep rallies, etc.) on the Band Instagram account, the Band Facebook page, and the band website www.knightband.com (we will never include the child's name).

Please initial I give permission to post pictures of my child.

Parent Name (printed) _____ Student ID # _____

Parent Signature _____

*PLEASE FILL OUT THE INFORMATION BELOW:

- Parent Email (any addresses you would like us to use for correspondence)

- Parent Phone Numbers _____

- Instrument Make/Model/Serial # _____