

April 22, 2015

Dear Instrumental Music Parents,

Our preparations for competitions and band pageants are now underway. Additionally marching band and pageant season is commencing and I want to let you know the most important dates for performances. Preparing our middle and high school ensembles in a few short months and getting ready for competitions and local events requires a great deal of preparation and cooperative efforts. We need to coordinate our events and minimize absences from rehearsals and especially performances.

Please note these dates now and put them on your family calendars:

SENECA FALLS BAND PAGEANT

MAY 15th includes middle and high school jazz bands during school hours.

MAY 16th includes 7/8 grade school band, high school band, marching band, drum line, color guard and twirling.

GORHAM BAND PAGEANT

May 29th includes middle and high school jazz bands during school hours. Drum line, color guard, twirling squads.

May 30th includes 7/8 grade school band, high school band, marching band

These two events constitute our entire season for evaluation while participating in some very competitive fields of bands. We want to do our best and therefore we need every student to participate. We expect our students to be present for all performances. We pay to participate in these events and we value the feedback we receive from judges at these events.

*******Any known conflicts should be discussed with me ASAP so that instrumentation difficulties can be compensated for as early as possible. Please do your best to support our efforts and our talented kids by making these dates available.**

Looking forward to another great season filled with music and success.

Sincerely,

Mr. Zajac

869-9636 ext. 1113

rzajac@southseneca.org

**SSCS BAND
PAGEANT DATES**

- We have read and understand the dates for Seneca Falls and Gorham Pageant.
- We agree to acknowledge these dates and allow our child to participate on these dates for the bands and ensembles they are part of.

STUDENT NAME (please print): _____

Parent Signature: _____

Thanks for Your Support

Mr. Zajac

Any conflicts should be reported to me as soon as possible to avoid instrumentation difficulties.

School: **South Seneca Central School** Director: **Mr. Zajac**

EMERGENCY MEDICAL FORM
2015 Seneca Falls Pageant of Bands

Student Name _____ Birth Date ____/____/____

Home Phone # () _____

Address _____

Name of family doctor _____ Doctor's phone # () _____

Please list any prescription medications student is currently taking, medical conditions, allergies, etc., that the medical staff should be aware of

AUTHORIZATION FOR EMERGENCY TREATMENT

I/We, being the parent(s) or legal guardian(s) of the above-named individual, do hereby authorize emergency treatment as needed, or under the recommendation of the emergency medical staff. They are to act in my/our behalf in authorizing medical, dental, surgical care and hospitalization for the above-named individual for the duration of the event. It is understood that this permission is authorized only under the condition that we, as parents, cannot be contacted to authorize treatment.

Parent Name _____ Phone # () _____

Parent Signature _____ Additional Phone # () _____

Address _____

Parent Name _____ Phone # () _____

Parent Signature _____ Additional Phone # () _____

Address _____

Name of Insurance Company _____

Contract Number _____