

Music Trip Expectations

1 Required Conduct

- a. Polite, respectful behavior and school appropriate language is expected while on the trip, whether on the plane, bus, at the hotel, at our rehearsals and performance, or while dining.
- b. Understand that there are 229 students on this trip. Please be responsible with your behavior: eating right and sleeping are necessary to stay healthy (we need everyone to perform!), getting along with/ being kind to those around you, taking your medicine if necessary, etc. are all important to this trip being successful.
- c. If your parent is coming, please know that you still **MUST** report to and stay in contact with your assigned chaperone and attend all trip activities of safety for the group. You may not leave the group without prior consent of Mr. Smalley and Mrs. Durkin and notifying your chaperone upon leaving and your return if applicable.
- d. Be a positive representative of the NAHS Music Department, NAHS, and the North Andover community.

2. General Rules

- a. Be advised that the rules in the NAHS student handbook are applicable for all out of school functions, and will be in effect for the entire trip. If a student is in violation of any of these rules, while on the trip (such as drinking, use of tobacco or drugs, absenteeism, violation of curfew, etc.), action may be taken against the student. Severe offenses will merit the student being sent home immediately at the parents' expense.
- b. Laptops, expensive items, game systems, etc. are strongly discouraged since there may not always be a safe place to keep it. The only money that will be needed is for lunch on Thursday and Friday. All other expenses have been paid except for souvenirs while sight seeing.
- e. Instructions delivered by music directors, chaperone and hotel personnel, and the festival clinicians/ conductors/ staff will be followed. If you have a question or concern about a given directive see Mrs. Durkin or Mr. Smalley.
- d. Attendance at all meals is mandatory (including breakfast!!).
- e. The schedule is to be followed. No tardiness or absences will be tolerated. The 250-person group is depending on everyone to be on time and ready to go with a smile and positive attitude.
- f. Your chaperone will be contacting you via cell phone during the trip. You **MUST** stay in contact with your chaperone to ensure everyone is safe. Please be responsible and **RESPOND** to texts, initiate texts when necessary, and **KEEP YOUR PHONE CHARGED**.
- g. Students are expected to check in with their chaperones at various points throughout the day. Students **MAY NOT** walk around Nashville or anywhere off the hotel premises alone and without their chaperone or the consent of their chaperone. This is a safety issue, and a non-negotiable subject.
- g. All luggage will be inspected by TSA. Please do not bring anything on the trip that would result in disciplinary action or embarrass yourself in any way.
- h. Make sure to stay with at least two or three others at all times. If you see someone by themselves, make sure to have them join your group.
- i. While at the performances and rehearsals, do not talk or use cell phones. Please show the conductors and other performing groups the same respect you would want to be given.
- j. We are traveling to Nashville to sing and perform. Make sure you get enough rest, eat properly, drink enough water, so we can be sure to perform to the best of our abilities.

3. Plane and Bus Conduct

- a. Some planes may not have TVs. Please bring things to keep yourself entertained.
- b. Bring snacks and water so you can stay **HYDRATED**, since you will be doing a lot of performing throughout the weekend. Snacks **MUST BE NUT FREE!**
- c. Noise must be kept at a reasonable level. Be fair to your classmates and those around you who are **NOT** with our music department.
- d. Seating: you get what you get and you don't get upset. We can't have everyone in our large group

changing seats as it is extremely disruptive to other passengers. Make a friend.

4. Hotel Conduct

- a. Room captains will be in charge of all room keys and relaying room- related information.
- b. We are not the only guests at the hotel. Please be courteous and considerate to those around you.
- c. Rooms must be kept clean and left in the condition in which they were found.
- d. No running or craziness throughout the hotel, especially in the pool area.
- e. At curfew, chaperones will tape your room. Students must stay in their rooms. If there is an emergency and the tape must be broken, please notify Mrs. Durkin, Mr. Smalley, or your chaperone. There will also be a security guard hired to monitor our group's safety.
- f. Hotel curfew will be strictly enforced. You must remain in your room until 15 minutes prior to breakfast. This is when the tape will be taken off the doors.
- g. Students will be permitted in rooms other than their own until curfew only if the room doors are left completely open.
- h. Nobody other than NAHS students, chaperones or staff is permitted in the rooms. Remember to lock your doors and look to see who it is before opening.
- i. Hotel Rule- no students are allowed in the pool and fitness areas without a chaperone present.
- j. Make sure not to use the hotel room phones or room service. These services can be very expensive!

5. Concert and Rehearsal Etiquette and Conduct

- a. Cell phones **MUST BE TURNED OFF IN PERFORMANCE VENUES!**
- b. Leaving/ bathroom during performances and rehearsals: Students are **NOT** to get up during a group performance. You may only leave the performance hall to use the bathroom, get a drink, etc. in between groups, and are expected to return promptly. Students are not to hang out outside the performance hall. Please give the same respect you would want to get in return. Do not leave clinics or honor rehearsals unless it is an emergency out of respect for the clinician.
- c. If you are in the honor band/ honor choir, it is expected that all students **MUST** have all pieces well-learned before we leave. The conductor cannot work with us if we are not confident with our music. This is non-negotiable and directly reflects upon our music department.
- d. Students must have their music, music binders, and a **PENCIL** with them for all honor rehearsals.
- e. All students are expected to be respectful of the conductor and other students in the festival. The conductor might ask you to try things that contradict what your directors told you. Be respectful and go with it!

6. Make sure to think before you act. Don't do anything you may be ashamed of later.

7. Most importantly: perform well and HAVE FUN!!

AGREEMENT:

I agree to abide by all rules and regulations listed above during the entire trip and understand what is expected of me. I understand that breeches of these rules and regulations will result in disciplinary measures.

Student Name:.....

Student Signature:..... Date:.....

Parent Name:.....

Parent Signature:..... Date:.....

*By signing, the parent acknowledges that he/she has read and discussed this contract with his/her child.

**Music Department Health and Emergency Card
2018 - 2019**

Please print or type in the following information:

Name:..... D.O.B.:

Parent / Guardian:..... Tel.#

Home Address:..... Other Ph. #:

Family Physician:..... Tel. #:.....

Health Insurance Co.:Policy #

In case of an emergency, if parent can't be contacted, please notify:

Name:Relationship:

Address:..... Tel.#

Allergies/ Medications

Allergies and their severity (please list if applicable):.....

.....

Does your child carry an EpiPen? Yes / No

Are there any illnesses/ conditions for which this child is currently receiving treatment and / or medication? Yes / No

Please list any conditions we should be aware of while away with your child:

.....

Please list and describe medications (if applicable):

.....

Is your child able to self-administer these medications: Yes/ No

Other Information

Other pertinent information:.....

In Case of medical emergency, I hereby authorize any licensed physician, hospital, clinic, or other medical facility to hospitalize and secure proper treatment for my child as named above. In the event that a parent /guardian or contact person cannot be reached by telephone, I authorize my child's director or chaperone to secure emergency treatment for my child.

.....
Signature of parent or guardian

.....
Date

**OVERNIGHT/INTERNATIONAL TRIP
PARENT CONSENT FORM, RELEASE FROM LIABILITY AND INDEMNITY AGREEMENT**

(Student Under Age 18)

THIS FORM MAY NOT BE ALTERED

I/We, the undersigned _____¹ of _____²
a minor, do hereby CONSENT to his/her participation in the _____
Program education trip to _____ (hereinafter referred to as the
"Program") planned for _____ through _____, 20____, and sponsored by the North
Andover Public Schools.

On behalf of myself/ourselves, and my/our child, I/we also forever RELEASE and discharge the Town of North Andover and its departments, officers, employees, and agents (hereinafter collectively referred to as "North Andover"), from any and all claims, damages, losses or expenses of whatever kind or nature which I/we may have or acquire as the parent(s) or guardian(s) of said minor arising out of or resulting, directly or indirectly, from personal injuries to my child or property damage which results from said minor's participation in the Program. I/We also RELEASE and discharge North Andover from any and all claims, damages, losses or expenses of whatever kind or nature which said minor may have or acquire arising out of or resulting from, directly or indirectly, his/her participation in the Program.

I/We furthermore agree to defend, INDEMNIFY and hold harmless North Andover against any and all claims, damages, losses or expenses of whatever kind or nature which said minor may have or acquire arising out of or resulting from, directly or indirectly, his/her participation in the Program, and to defend, INDEMNIFY and hold harmless North Andover against any and all claims, damages, proceedings, losses or expenses of whatever kind or nature that North Andover may have to pay or that may be asserted against North Andover that arise directly or indirectly from said minor's participation in the Program.

I/We hereby authorize North Andover's employee(s) or agent(s) who is supervising said minor, and/or the host family of said minor (if applicable) to act on our behalf in authorizing and consenting to emergency medical care including surgery, if necessary, dental care, and/or hospitalization for said minor if he/she becomes ill or is injured while participating in the Program. This Authorization and Consent may be presented to the appropriate medical/dental staff at such time as emergency medical care, dental care or hospitalization is required. I/We hereby RELEASE and discharge North Andover from any and all claims of any nature whatsoever, which may arise out of the decision to provide emergency medical care, dental care or hospitalization during the Program. I understand that North Andover has no insurance covering such medical or hospital costs incurred for my/our child, therefore, any cost incurred for such treatment shall be my/our sole responsibility.

I/We also hereby authorize North Andover, acting through the Superintendent of Public Schools or his/her designee, to cancel, reschedule or alter in any other manner the Program whenever he/she determine in his/her sole discretion that such cancellation, rescheduling or alteration is required. I/We agree to release North Andover from any claim for damages or loss that I/we may incur by reason of such cancellation, rescheduling or alteration.

¹ Insert legal relationship to student, e.g., "parent," "guardian."

² Insert name of student.

I/We further authorize North Andover's employee(s) or agent(s) who is supervising said minor while participating in the Program to require said minor to comply with any rules, standards of behavior or instructions such employee(s) or agent(s) may reasonable establish. I/We agree that such employee(s) or agent(s) shall have the right to enforce such rules, standards of behavior or instructions and shall have the further right to terminate said minor's participation in the program at any time when such employee(s) or agent(s) considers the conduct of said minor incompatible with the interest, harmony, comfort or welfare of the other participants in the Program or with said minor's own safety or welfare. Possession, sale, distribution or use of illegal drugs, alcohol or a weapon(s) will constitute grounds for terminating said minor's participation. If said minor's participation is terminated, I/we consent to have said minor sent home in the most expeditious manner without refund at my/our expense. I/We accept in good faith the determination of such employee(s) or agent(s) in all matters relating to the supervision of said minor while in the Program.

Signature of Parent or Guardian

Date

Relationship

Print Name of Parent or Guardian

Signature of Parent or Guardian

Date

Relationship

Print Name of Parent or Guardian

SOURCE: No. Andover

**PARENTAL CONSENT, RELEASE FORM AND MEDICATION AUTHORIZATION
FOR FIELD TRIP**

(Student Under Age 18)

THIS FORM MAY NOT BE ALTERED

Your child is invited to participate in a school-sponsored field trip. Participation in this field trip is voluntary, but you must give permission before your child may go. If you do not give permission, your child will remain at school for the regular day and continue academic work there unless, of course, the trip takes place during non-school time such as weekends and vacations.

Your child will be supervised by teachers and adult volunteers. It is possible that more risks may be faced by participating in this field trip than if your child stayed at school. We cannot enumerate every risk, but we believe that you are generally familiar with this activity and your child; therefore, you are in the best position to decide whether your child should participate. The School Department and principal have approved this field trip, but we cannot and do not guarantee that there will be no injuries or damages as a result of this field trip.

This is a legal document and you are free to obtain a lawyer's advice before signing it. You may not, however, change the language of this form, and any additions or deletions you make to this consent and release are void.

By signing this form, you agree that your child may participate in the field trip. By signing this form, you also agree to release the Town of North Andover, town officials, town employees, and volunteer supervisors from any and all damages, death and/or injuries of any kind you and your child might suffer as a result of participating in this field trip.

Consent and Release:

I, the undersigned _____¹ of _____²
("my child"), a minor, do hereby consent to my child's participation in a field trip sponsored by the North Andover Public Schools.

On behalf of myself and my child, I also agree to forever release the Town of North Andover, and all of their employees, agents, officials, board members, volunteers and also any and all individuals and organizations assisting or participating in field trips and/or programs of the North Andover Public Schools ("the Releasees") from any and all claims, rights of action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries to my child or property damage resulting from my child's participation in the field trip sponsored by the North Andover Public Schools.

On behalf of myself and my child, I also promise to indemnify, defend and hold harmless the Releasees against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, arising directly or indirectly from my child's participation in the field trip sponsored by Town of North Andover Public Schools.

¹ Insert legal relationship to student, e.g., "parent", "guardian".

² Insert name of student.

Should it be necessary for my child to have medical treatment while participating in this trip, and a parent cannot be reached, I hereby, by my signature, give the school district personnel permission to use their judgment in obtaining medical service for my child and give permission to the physician selected by the school district personnel to render medical treatment deemed necessary and appropriate. I understand that the school district has no insurance covering such medical or hospital costs incurred for my child; therefore, any cost incurred for such treatment shall be my sole responsibility.

I further affirm that I have read this Consent and Release Form and that I understand the contents of this Form. I understand that my child's participation in these programs is voluntary and that my child and I are free to choose not to participate in said programs. By signing this Form, I affirm that I have decided to allow my child to participate in these programs with full knowledge that the Releasees will not be liable to anyone for personal injuries and property damage which my child may suffer in these programs.

Student's Name: _____

Parent/ Guardian Signature: _____

Address: _____

Home Telephone: _____ Work Telephone: _____

Date: _____

This consent form relates to the following field trip:

Date: _____ Destination: _____

SOURCE: No. Andover

MAKE-UP WORK
NAHS Music Department Trip
2019 Nashville Festival of Gold

It is imperative that you meet your academic obligations **within one week** of your return unless any of your teachers have requested otherwise. The work must be completed carefully and thoroughly, and to the satisfaction of your teachers.

In past years, students have not always followed through on this obligation. This puts the possibility of future trips in jeopardy. You will have time both on the plane and at the hotel to complete a good deal of schoolwork.

Before you go you are asked to contact each of your teachers and have them sign this sheet. **This is due no later than Friday, March 14, 2019.**

TEACHERS: PLEASE SIGN BELOW

I have discussed _____ absence on Thursday, March 28th* and Monday, April 1st with her/him and (s)he is aware of work to be completed and has arranged to make up all work in a timely manner.

<u>PERIOD</u>	<u>SUBJECT</u>	<u>TEACHER'S SIGNATURE</u>
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1. _____

2. _____

3. _____

4. _____

5. _____

Nashville Festival of Gold

Boxed Lunch Order

(BANDS: for dinner on Friday between clinics, CHOIRS: for lunch on Saturday after CC clinic)
If you are in band and choir, please write choice for both on this form.

Name:

Chaperone:

Band, Choir, or Both:

Please Circle Your Choice:

Roast Turkey GF Turkey Smoked Ham GF Ham

Vegetarian (lettuce, tomato, onion, cucumber, green pepper, and three cheese)

GF Vegetarian Vegan (vegetarian without cheese)

All lunches come with chips, bottled water and cookie (apple substituted for GF)

Dietary Restriction Notes:

Nashville Festival of Gold

Breakfast Order

For Friday, Saturday, and Monday. If you want something different for different days, please note.

Name:

Chaperone:

Band, Choir, or Both:

Please Circle Your Choice:

Bagel and Cream Cheese Yogurt and Granola Bar (Gf and Nut Free)

Please Circle your Choice:

Apple Orange Banana

All breakfasts come with main item(s), bottled water, and fruit

Dietary Restriction Notes: