



ROCKVALE BAND

rockvaleband.com | rockvaleband@gmail.com

Schedule Agreement

By signing below, we agree that we have viewed the Rockvale Band calendar (printed copy handed out; most up-to-date version located on RockvaleBand.com).

We understand that students are expected to be in attendance at all camps, after-school rehearsals, and performances.

We understand that doctors appointments and vacations should be scheduled around these band events.

As a student, I understand that my work schedule is not an acceptable excuse for missing a camp, after-school rehearsal, or performance. I agree to turn my band calendar in to my work supervisors as soon as possible to avoid work/band conflicts.

We understand that excessive absences from rehearsal and/or performances will result in a student's dismissal from the band program.

We understand that in the event of an unforeseen emergency (illness, death in the family, etc), we will communicate with the band directors as soon as possible if a rehearsal/performance will have to be missed (24hrs notice preferred if possible).

Student name: _____ Date: _____

Student signature: _____

Parent/Guardian name: _____ Date: _____

Parent/Guardian signature: _____