



# AMS BAND Information and Agreement Form



Please complete and return to Mr. Johnson  
by **Friday, August 19<sup>th</sup>**

Grade Level: \_\_\_\_\_ Homeroom Teacher: \_\_\_\_\_

Student Name: \_\_\_\_\_

Student's Instrument: \_\_\_\_\_

Shirt Size (circle one): YXS YS YM YL AS AM AL AXL AXXL AXXXL

Student's Parent/Guardian's Name: \_\_\_\_\_

Mobile #: \_\_\_\_\_ Work #: \_\_\_\_\_

Parent's E-mail: \_\_\_\_\_

Student's Parent/Guardian's Name: \_\_\_\_\_

Mobile #: \_\_\_\_\_ Work #: \_\_\_\_\_

Parent's E-mail: \_\_\_\_\_

### THE SYLLABUS CAN BE FOUND ON:

ASHWORTHBAND.COM, SCHOOLGY, OR REQUESTED HARDCOPY.

**PLEASE READ THE SYLLABUS CAREFULLY AND RETURN THIS FORM TO MR. JOHNSON BY AUGUST 19<sup>TH</sup>. PLEASE HAVE THE BAND FEE according to syllabus) PAID IN FULL or ARRANGED A PAYMENT PLAN BY AUGUST 19<sup>TH</sup>.**

**STUDENT: I have read the syllabus and will fulfill the expectations in place. I will act as a responsible, committed band member and student while representing our school and community.**

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**PARENTS: Please check ONE LOCATION you have read the AMS band syllabus. By signing below, you and your child are stating you have read and understood the syllabus and wish to continue in band.**

- Ashworthband.com
- Schoology
- Paper Copy

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_