



AMS BAND
Information and Agreement Form



Please complete and return to Mr. Johnson
by **Friday, August 28th**

Grade Level: _____ Homeroom Teacher: _____

Student Full Name: _____

Home Phone: _____ T-shirt Size (circle one): YS YM YL AS AM AL AXL

Mother's/Guardian's Name: _____

Mobile #: _____ Work #: _____

Father's/Guardian's Name: _____

Mobile #: _____ Work #: _____

Parent's E-mail: _____

**PLEASE READ THE SYLLABUS CAREFULLY. RETURN THIS FORM TO
MR. JOHNSON BY AUGUST 28th. IT WILL BE COUNTED AS A GRADE.**

**STUDENT: I have read the syllabus and handbook and will do my best to comply
with the expectations set forth. I will act as a responsible, committed band
member and student while representing our school and community.**

Student Signature: _____

Date: _____

**PARENTS: Please sign that you and your child have also read and understood the
syllabus and handbook.**

Parent Signature: _____

Date: _____

Booster Club

This organization serves to help the Ashworth Band with special projects, fundraising, chaperoning, and other ways to support our students. We will need some officers to help get others organized to help with different needs as need be. Three positions are vacant:

President, Vice President, and Secretary. If you are interested in being a part of one of these positions, please contact me at Wjohnson@gcbe.org for more information.