



Send completed form to: [President@TvhsBand.com](mailto:President@TvhsBand.com), or bring a hard copy to Mr. Cowee.

## Temecula Valley High School ~ Concert Band

### Member Information and Agreement for 2022-2023

Student's Name:	Grade:	T-shirt size:
Instrument:	Student NON-School Email:	
Student Cell:		
Student's Date of Birth:	Lives with (circle one): Both parents   Mom   Dad   Guardian	
Address:	City and Zip:	
<i>Person filling out form:</i>	<i>Relationship to student:</i>	
Father's Name:	Father's Email:	
Father's Cell Phone:		
Mother's Name:	Mother's Email:	
Mother's Cell Phone:		
Guardian's Name (if applicable):	Guardian's Email:	
Guardian's Cell Phone:		
I'm interested in helping in the following areas: (please circle all that apply)		
Uniforms	Board position/committee	Fundraising
Concert Concessions	Other:	Spring Festival

Please initial the following and sign below.

**Parent                      Student                      Golden Valley Regiment Membership Policy (available at [TvhsBand.com](http://TvhsBand.com))**

\_\_\_\_\_                      \_\_\_\_\_                      I have read the TVHS Golden Valley Regiment Handbook and understand and support the philosophy and guidelines illustrated within. Additions and deletions may be forwarded to me at a later date.

*I also agree with the following:*

- |       |       |  |
|-------|-------|--|
| _____ | _____ | All performances are mandatory.  |
| _____ | _____ | Student practice is a requirement.   |
| _____ | _____ | Students that terminate membership after the first two weeks of the academic school year will not receive any refund of donations. |
| _____ | _____ | Student will take proper care of instrument and facilities.  |
| _____ | _____ | Student will attend all fundraising events unless given specific permission by the director.                                       |

\_\_\_\_\_  
Student's name (Printed) and Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian's Name and Signature

\_\_\_\_\_  
Date

# Temecula Valley High School ~ Golden Valley Regiment

## Maintenance Agreement for District-Owned Musical Instruments

<b>If not applicable, please indicate here: _____ N/A Student-owned instrument</b>	
Student Name:	Date:
Instrument:	Make/Model:
Serial Number:	Included Accessories:

I request that my student be loaned the above described district-owned musical instrument for their use during the period specified below:

**Beginning:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      **Ending:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

I understand that the following accessory items are recommended to maintain the instrument in the best possible condition and playing order:

• Swab	• Cleaning Cloth	• Cleaning Rod
• Reeds and Reed Case	• Snake	• Ligature mouthpiece
• Mouthpiece brush	• Valve oil/slide grease	• Cork grease

I will return this instrument on or before the date indicated above. I agree to return the instrument in the same condition in which it was loaned, with the exception of normal wear. I will be responsible for the musical instrument and promise to pay for repair, if damaged, and for replacement if lost or stolen. I agree to immediately return this instrument if my student is no longer a member of the band program.

I understand all repairs must be authorized by the band director and completed by The Master Musician. I understand I am responsible for 50% of any routine repair costs up to a total of \$75 per repair, and 100% of repair costs for damaged instrument repairs caused by accidents or misuse.

I will be donating a maintenance fee of \$50.00 for the school year, payable to TVHS Band Boosters. This is not a mandatory donation, but will assist with replacement costs if the instrument cannot be repaired.

\_\_\_\_\_  
Parent/Guardian Printed Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Address/City/ZIP

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

I have received instruction on the proper care of this instrument and the items helpful for its use and maintenance. I realize that by neglecting to follow these instructions, I become responsible to pay for the repair, if damaged, and care of this instrument.

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

# Temecula Valley High School ~ Golden Valley Regiment

## Loan Agreement for Concert Band Tuxedo and Accessories

Student Name:	Grade:	Class Period:
Address/City/Zip:		
Instrument:	Cell Phone:	
Non School Email:	Check out date:	

### Items Received (Check all that apply):

Item	Replacement Cost	Checked Out
Tuxedo Jacket*	\$70.00	
Tuxedo Pants*	\$30.00	
Garment Bag	\$8.00	
Hanger	\$2.00	
Other:		

*\*Concert band boys/students receive a dry-cleaned tuxedo jacket and pants. We ask that they be returned in the same condition, dry-cleaned, OR that you return the soiled uniform, along with the \$7.00 cleaning fee. Thank you!*

I will donate a dry cleaning fee of \$7.00, payable to TVHS Band Boosters. This is not a mandatory donation, but will assist with dry cleaning and concert band uniform upkeep costs.

By signing below, I agree to the loan of this/these item(s) to the student listed. I agree to see that it/they is/are properly cared for and maintained.

I further agree that this/these item(s) is/are received in good condition except as noted at the bottom of this form. Pursuant to Education Code Section 48904, in the event that this/these item(s) is/are damaged beyond normal wear and tear, altered, lost, or stolen, I agree that I am financially responsible and will be required to pay Temecula Valley High School of the Temecula Valley Unified School District for the full cost of the repairs or replacement.

The assessed value and/or damage shall be determined by Temecula Valley High School and/or by the maker of the items. I further agree to return this/these item(s) at any time upon request of the school.

Parent/Guardian Name (printed): \_\_\_\_\_ Signature: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Uniform Coordinator Signature: \_\_\_\_\_

### For Uniform Coordinator Use Only

Check-in Date: \_\_\_/\_\_\_/\_\_\_      Dry Cleaned: Yes   No   N/A      Items Not Received (check all that apply):

Band Item - Replacement Cost	Checked In		
Tuxedo Jacket - \$70.00	Yes	No	N/A
Tuxedo Pants - \$30.00	Yes	No	N/A
Garment Bag - \$8.00	Yes	No	N/A
Hanger - \$2.00	Yes	No	N/A
Other:	Yes	No	N/A

Total Replacement Cost: \_\_\_\_\_

# Temecula Valley High School ~ Golden Valley Regiment

## Concert Band

### Voluntary Pledge to Donate

Typical Program Goals and Costs - Subject to Change

Performance Group	Fundraising Goal	Approximate per student cost*
Concert Band		\$50.00
Uniform Dry Cleaning (Concert tuxedo)**		\$7.00

\*\*Concert band boys/students receive a dry-cleaned tuxedo jacket and pants. We ask that all uniforms be returned in the same condition, dry cleaned, OR you may return the soiled uniform with the \$7.00 cleaning fee. Lewis Cleaners in Moraga Plaza charges \$7 for the tuxedo.

I will support the TVHS Golden Valley Regiment and hereby pledge \$ \_\_\_\_\_ to support this program. My pledge will be paid on a schedule to meet the monthly group fundraising goals set by the band director, according to our expenses and budget.

**Please make checks payable to TVHS Band Boosters.**

*I understand that I will be responsible for paying any bank charges that the TVHS Band Boosters incur if a check(s) I have written is/are returned due to insufficient funds.*

Pledge Amount	Date to be sent
\$	
\$	
\$	
\$	

Printed Name of Student:	Date:
Signature of Donor:	
Printed Name of Donor:	
Email Address of Donor:	

Pledges/donations may be brought to the band room and placed in the Booster Box, located just outside of Mr. Cowee's office. You may also submit your pledge online via the PayPal link on our band website: [TvhsBand.com/shop](http://TvhsBand.com/shop)

All pledge donations are tax deductible due to our 501(c)(3) non-profit corporation status. Our tax ID number is: 20-1637297

\*Please note that a pledge is strictly voluntary and there are absolutely no penalties for not contributing. The approximate per student cost is the approximate cost that the group incurs per student participating in each program, and is calculated by dividing the total fundraising goal per program by the number of students participating. These numbers are approximate as student numbers will fluctuate. The number is in no way a request for a specific donation amount, and is to be used as a guideline.

**HOLD HARMLESS AND INDEMNIFICATION AGREEMENT**

**BETWEEN**

**TEMECULA VALLEY UNIFIED SCHOOL DISTRICT**

**AND**

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**Name of Student**

**FOR PARTICIPATION IN**

TVHS Golden Valley Regiment (camp, rehearsals, performances, events)

**Name of Team(s) or Activity**

**Temecula Valley High School**

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Participation in the aforementioned activity is strictly voluntary. The student participant and his/her parent of the team(s) /activity mentioned above agree by virtue of their signatures (below) they will hereby agree to indemnify, defend, save, and hold harmless the Temecula Valley Unified School District, its officers, agents, servants, and employees, of and from all liability, claims, workers' compensation claims, demands, debts, suits, actions and causes of action, including wrongful death, personal injury, person property and reasonable attorney fees for the defense thereof, arising out of or in any matter connected with the participation, performance or any act or deed under or pursuant to the terms and provisions of this agreement by such indemnifying party, or its officers, agents, servants and employees.

This agreement remains in effect through June 30, 2023.

Additionally, the student, by virtue of their signature below agrees to abide by the rules put forth in the Student Handbook and/or Board Policy regarding their student/participant behavior during the aforementioned Activity.

By: \_\_\_\_\_  
Student Name (printed)                      Student Signature                      Date

\_\_\_\_\_  
Parent/Guardian Name (printed)                      Parent/Guardian Signature                      Date

Temecula Valley High School



**ADMINISTRATIVE REGULATION**  
**EXHIBIT**  
**MINOR - VOLUNTARY EXCURSION/FIELD TRIP WAIVER**  
**AND MEDICAL AUTHORIZATION**

**E 6153 (D)**

Dear Parent/Guardian:

Please complete and return **one signed copy** of this form to Temecula Valley High School. \_\_\_\_\_

has my permission to participate in the following activity: \_\_\_\_\_ Student's Name

TVHS/Varies	Varies	Varies
Destination	Departure Date & Time	Return Date & Time

It is extremely important to be aware of any medical condition/problem and/or medications a student is required to take when going on a field trip. Please list any medical conditions and/or medications that we should know about: \_\_\_\_\_

Any student who needs to take medication (both prescription and over the counter medications) while on a field trip **MUST** have written permission from both the parent and the physician, as well as provide the medications in the original, labeled container. The medication will be in the possession of a staff member as opposed to the student unless previous arrangements have been made (ie: student has written permission on file to carry medication, such as an asthma inhaler).

**\*\*Fill out this section ONLY if student may need to take medication during field trip\*\***

Name of Medication	Dose	Time(s) of Administration
Physician Signature	Date	Phone Number

\*If your student already has medication at school that they may need, you may contact the Health Office and arrange, **prior to the field trip**, for their medication, along with the permission forms, to be sent on the field trip. If you do not contact the Health Office, it will be assumed they will NOT be taking their medication unless you make other arrangements.

In the event of illness of injury, I do hereby consent to whatever x-ray, examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care are considered necessary in the best judgment of the attending physician, surgeon, or dentist and performed by or under the supervision of a member of the medical staff of the hospital or facility furnishing medical or dental services.

**As stated the California Education Code Section 35330, I understand that I hold the TEMECULA VALLEY UNIFIED SCHOOL DISTRICT, their officers, agents and employees, harmless from any and all liability or claims, which may arise out of or in connection with my child's participation in this activity.**

I fully understand that participants are to abide by all rules and regulations governing conduct during the trip. Any violation of these rules and regulations may result in that individual being sent home at the expense of his/her parent/guardian.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Student's Birth Date: \_\_\_\_\_

Medical Insurance Carrier: \_\_\_\_\_ Subscriber's ID#: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_