



ALLEN HIGH SCHOOL

ESCADRILLE

300 RIVERCREST BLVD | ALLEN, TX 75002 | WWW.ALLENBAND.COM

Summer 2019 Update

We hope that you are enjoying your summer with family and friends. It's hard to believe we are about a month away from the full band arriving for summer band rehearsals. The 2019-2020 season is promising to be very exciting. If you are new to the Escadrille, WELCOME! Do your best to understand the information enclosed in the following documents. If you are a vet, we're glad you're back; please read everything as there may be some new information for you. Here are a few highlights regarding the 2019-2020 season:

Welcome Alex Baczewski, Assistant Director of Bands (Lowery Freshman Campus)

Alex Baczewski is a saxophonist and will be joining Allen High School as Assistant Director of Bands at the Lowery Freshman Campus. Mr. Baczewski will be directing the LFC Symphonic Band, LFC Concert Band I and will assist with the LFC Wind Ensemble, Escadrille, and other ensembles at AHS. Mr. Baczewski currently serves as an Associate Instructor in the Department of Bands at the Indiana University Jacobs School of Music where he is pursuing a Master of Music degree in Wind Conducting. He holds a Bachelor of Music Education Degree from Baylor University. Mr. Baczewski served for three years as Associate Director of Bands at Decker Middle School in the Austin area where he founded the Decker Jazz Band and was instrumental in helping the Decker Honor Band to earn UIL Sweepstakes for the first time in school history. While teaching, Mr. Baczewski was a performing member of the Cedar Park Winds.

Welcome Jeremy Rohr, Assistant Director of Bands (Allen High School)

Mr. Rohr will continue his duties in Allen ISD as he will be joining the band faculty at AHS. Mr. Rohr will be directing the AHS Symphonic Band II and AHS Concert Band II as well as being responsible for AHS lockers, Region Band entries, and Solo & Ensemble entries.

Summer Band Calendar (slightly different than past years)

Please keep up with the calendar at www.allenband.com. Percussion and Color Guard have summer rehearsals scheduled prior to the full band report time. **FULL BAND begins on Thursday, July 25 (in the afternoon)**. In addition, there is an SLT Workshop scheduled July 22-24/24-25 (mornings) from 8am-4pm at AHS.

Please Print (Bring) Your Music to Summer Band

You can print it all at once with the "print packs" or print out the music separately. This will be constantly updated throughout the summer. Returning members: if you do not want to print the entire print pack, you can print out the music you don't have; note that the new music for the season is marked "New 2019" in the folder. SUGGESTION: Print everything a week before summer band so you https://drive.google.com/drive/folders/1_Lo1e7dvCtm9invPuD8doTcQyg9m9OFu?usp=sharing



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Hawaii Spring Trip

If you are planning on going on the spring trip to Hawaii, you should have already paid your deposit back in April 2019. **IF YOU ARE PLANNING ON GOING TO HAWAII BUT HAVE NOT PAID YOUR DEPOSIT, YOU SHOULD DO SO AS SOON AS POSSIBLE.** The second payment is due at Band Registration on Saturday, July 27.

Payment Schedule:

- * April 25, 2019 (First Steps @ AHS) - \$150 Non-Refundable Deposit
- * July 27, 2019 (Band Registration @ AHS) - \$350 Payment #2
- * August 20, 2019 - \$350 Payment #3
- * September 27, 2019 - \$350 Payment #4
- * October 25, 2019 - \$350 Payment #5
- * November 22, 2019 - \$350 Payment #6
- * December 20, 2019 - \$300 Payment #7
- * January 31, 2020 - \$300 Payment #8

You can mail to: Allen High School Band (attn. Susan Fulk), 300 Rivercrest Blvd, Allen, TX 75002

You can drop the check off in the AHS Band Office

You can pay online via FINE ARTS school pay (follow the link under "band")

- o <https://www.allenisd.org/Page/180>

REQUIRED JACKET PURCHASE FOR 2019-2020

All students in the Escadrille will be required to wear standard wet weather/cold weather jackets. Color Guard will have their assigned attire (please address questions to Mr. Singletary). If the weather is wet or extremely cold and you do not have the proper jacket, you will be dismissed at inspection and receive a "zero" for not participating. We will not have ponchos available for students that forget their required attire.

Woodwinds, brass, and percussion will be required to wear one of the following for cold or wet weather:

1. Senior Letterman Jacket (Official AHS Jacket) - this can be band or another AHS activity (as they are the same jacket).
2. Plain/Solid (no writing, images, markings), Navy jacket (hoodie, raincoat, etc). The color must be dark navy. Not royal blue. Must be free of any markings. You can purchase these on your own at any store (Target, Walmart, etc). A HOOD is recommended.
3. **Recommended:** Approved Allen Band Jacket available for purchase from the Allen Band Booster Association (ABBA). The jacket is water resistant and has a hood perfect for cold or wet weather. The jackets will be \$54 and you can PERSONALIZE your jacket (name, instrument, etc) for \$64. While this is not a required item (you can purchase a jacket on your own), you are encouraged to purchase this item from ABBA. You can purchase at registration or online here:
https://www.allenband.com/content.aspx?page_id=586&club_id=207916&item_id=7538



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Private Lessons/New Studio Teachers

Please begin scheduling lessons with your private teacher now to avoid getting on a waiting list if their studios are full! We have some new teachers highlighted below. You can access our list of studio teachers here:

https://www.allenband.com/content.aspx?page_id=22&club_id=207916&module_id=318368

Dr. Jun Qian (Clarinet): myclarinetprofessor@gmail.com, <https://www.junqianclarinet.com>

Eric Wallace (Trombone): 951-768-6119, ewallacebb@gmail.com

Rahim Rupani (Saxophone): 972-897-8855, Rahimzrupani@gmail.com

- Available for home studio now/awaiting AISD clearance

Haley Blanchard (Bassoon): haley_blanchard@sbcglobal.net

- Available for home studio now/awaiting AISD clearance

We will be adding a horn, trumpet, and percussion teacher soon.

Fees and Registration Day

Registration Day is required! This is where we pay fees, fit for uniforms, and purchase Allen Escadrille gear! All families should be saving now. All required fees must be paid in full at the time of registration. Please see the Registration Day form (attached) for a list of the required fees.

Listed below are the documents you need to start the season off well. These documents are attached and will be available on the homepage of www.allenband.com by early July. You can also view the band handbook on the homepage of www.allenband.com as well.

- Important Information Sheet
- Summer Band Calendar
- Registration Day
- Drop Off Diagram for morning rehearsals
- Summer Band Necessities
- Allen ISD Release and Medical Forms
- Required Physicals Paperwork (UIL)



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IMPORTANT INFORMATION

9th Grade Parent and Student Meeting – Tuesday, July 23rd (7pm-8pm)

Allen High School Band Hall (Parents)/Allen High School Ensemble Room (Students)

Please enter the building from the Performing Arts Center (PAC) doors. We cover rehearsal schedules, football game procedures, U.I.L. eligibility, financial commitments, and much more. The parent meeting will be led by Mr. Joshua Blankenship (Director of Bands Lowery Freshman Center) and Dr. Philip Obado (Director of Bands Allen ISD). The student meeting will be led by Mr. Alex Baczewski (Assistant Director of Bands, Lowery Freshman Center) and Chris Cammarata, President of the Allen Band Council. These meetings are specifically for incoming 9th graders or any other student who is new to Allen I.S.D. and our band program. We look forward to seeing you all there!

STUDENT LEADERS ONLY – July 22-24 (8a-4p)/July 25-26 (8a-11a)

All Student Leadership Team members will be trained on these three days. Manny Maldonado from SASI: The Leadership People (www.studentsleading.org) will lead a seminar for all SLTs on July 22 and 23. Attendance is required; please contact Dr. Obado if you have any issues. We will combine leadership sessions, teaching workshops, and work sessions on July 24th to prepare for the full band on July 25th. We will have additional SLT work days on July 25-26 in the mornings of full band rehearsal.

FULL BAND SUMMER REHEARSALS – Thursday, July 25th – Tuesday, August 14th

All rehearsals will take place at Allen High School

Attendance at summer rehearsals is required of all members. The schedule from July 29-August 2 is 7:00a-4:00p each day with lunch between 11:00a-12:00p. For the most part, we will be marching outdoors in the morning and will be indoors after lunch. The schedule from August 5-August 12 is 3:00p-8:00p (Aug 13 is 1pm-7pm with the Premiere Show beginning at 6pm). Please follow the attached calendar for your specific report days and times. Please bring your lunch during summer band. Because the physical nature of our activity, students must adhere to the following guidelines: wear lightweight comfortable clothing, tennis shoes w/socks (refrain from no-show socks to avoid blisters), sunscreen, baseball caps/visors, and above all bring plenty of WATER every day. **You will be expected to have and carry your own ½ gallon water jug to all band activities including football games and band contests.** These jugs can be purchased at various retail stores. Please go to www.allenband.com for information regarding Summer Band Necessities/Requirements for specific size and colors.

If you see an **UNAVOIDABLE** situation that will cause you to miss a session, you **MUST LET US KNOW**. Communication is vital to our success. Please go to www.allenband.com and input every absence you will have for summer band rehearsals. Further instructions are on the excused absence request form.



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ESCADRILLE REGISTRATION DAY – Saturday, July 27th (REQUIRED)

Allen High School

Registration Day is intended for all members of the Band. It is designed as a “One-Stop-Shop” for students and parents participating in the Escadrille. Uniforms, music, instruments, and equipment will be issued at this time. Permission slips and contact information will be completed and all required fees collected. Apparel, yard signs, and other optional spirit items will also be available. Parents are encouraged to join the Allen Band Booster Association and to sign up as volunteers for many band events. Parent support plays a vital role in the success of our students so please make plans to join us on this important day. **Please refer to the registration day document for further details.**

ALLEN ESCADRILLE FAN FEST – Friday, August 2nd

Watters Creek performance @ 7pm

After rehearsal gets out, we will have a short break before the band leaves for Watters Creek. We will leave AHS at 6pm and bus to Watters Creek. We will parade around Watters Creek beginning at 6:30p for a performance on the Green beginning at 7pm and concluding at 8pm. Students can be picked up at Watters Creek (with the appropriate paperwork) or can ride back after the performance.

SUMMER BAND REHEARSALS & MARCHING BAND TIER SYSTEM

Attendance at summer band rehearsals is critical. We understand that there are family trips and other conflicts that happen during the summer months. While there are no grade consequences for absences and tardies, summer rehearsal attendance can directly affect a student’s spot. Spots are assigned based on three things: (1) Band placement at AHS/LFC (placements were already assigned based on audition in Spring 2019), (2) marching technique evaluated by directors at summer rehearsals, and (3) attendance at summer rehearsals. Please note that students will miss critical information for any kind of absence. “Excused” or “Unexcused” absences do not matter; your spot depends on your positive attendance.

What is the tier system? Students will be assigned spots in one of four tiers. The top performing tier is Tier 1, Tier 2 is the next level of students, Tier 3 is next, and the final tier will be our Reserve Block. While all four tiers will have spots in the Traditional Show, only students in Tiers 1-3 will have spots in the Contest Show. Students in the reserve block will have separate Contest Show drill and will perform at every football game in the end zones. While the reserve block will not march at our three contests, they will play an important support role for the band; their attendance is required. Reserves will perform at every football game for the entire season.

BACK-TO-SCHOOL GENERAL INFO

Beginning on the second day of school (Thursday, August 15), all daily marching rehearsals will begin at **7:00 a.m. each morning at the AHS Track Stadium**. Freshmen will be dismissed and bused to LFC around 8:15 a.m. each morning. **We will no longer have Monday Night rehearsals.**



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ATHLETICS

Athletes, we have had great success working and scheduling with coaches to give you the opportunity to participate in both marching band and athletics. We will continue tweaking this project on an individual basis, with regards to the sport in which each student is participating.

Your student leaders are planning fun social activities scattered throughout summer band. Take some time to get acclimated to the heat and exercise by getting off the couch and into the great outdoors once in a while. It's going to be another GREAT YEAR!

Allen Eagle Band

Summer Band 2019

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<p>July 21</p>	<p>22</p> <p>Student Leadership Team (SLT) Training/Work Day 8:00 a.m. - 4:00 p.m.</p>	<p>23</p> <p>Student Leadership Team (SLT) Training/Work Day 8:00 a.m. - 4:00 p.m.</p> <p>9th Grade Parent/Student Meeting 7:00 p.m. Band Hall</p>	<p>24</p> <p>Student Leadership Team (SLT) Training/Work Day 8:00 a.m. - 4:00 p.m.</p>	<p>25</p> <p>Student Leadership Team (SLT) Training/Work Day 8:00 a.m. - 11:00 a.m.</p> <p>EVERYONE – Afternoon Band & CG Camp 12:00 p.m. - 4:00 p.m.</p>	<p>26</p> <p>Student Leadership Team (SLT) Training/Work Day 8:00 a.m. - 11:00 a.m.</p> <p>EVERYONE Band & CG Camp 12:00 p.m. - 4:00 p.m.</p>	<p>27</p> <p>Escadrille Registration</p> <p>AHS-PAC All Day</p>
<p>28</p> <p>Lunch is from 11-12 each day of camp. Students may leave for lunch or bring it with them to eat on site.</p>	<p>29</p> <p>EVERYONE – All Day Band & CG Camp 7:00 a.m. - 4:00 p.m.</p>	<p>30</p> <p>EVERYONE Band & CG Camp 7:00 a.m. - 4:00 p.m.</p> <p>SOCK HOP AHS PAC Commons 7:00 p.m.</p>	<p>31</p> <p>EVERYONE Band & CG Camp 7:00 a.m. - 4:00 p.m.</p>	<p>August 1</p> <p>EVERYONE Band & CG Camp 7:00 a.m. - 4:00 p.m.</p> <p>KICKBALL TOURNAMENT AHS Band Hall 7:00 p.m.</p>	<p>2</p> <p>EVERYONE Band & CG Camp 7:00 a.m. - 4:00 p.m.</p> <p>Escadrille Fan Fest!! Watters Creek 6pm call time REQUIRED</p>	<p>3</p>
<p>4</p> <p>Please note that ALL rehearsals and performances are considered required unless otherwise noted.</p>	<p>5</p> <p>EVERYONE – Evening Band & CG Camp 3:00 p.m. - 8:00 p.m.</p>	<p>6</p> <p>EVERYONE Band & CG Camp 3:00 p.m. - 8:00 p.m.</p>	<p>7</p> <p>EVERYONE Band & CG Camp 3:00 p.m. - 8:00 p.m.</p>	<p>8</p> <p>EVERYONE Band & CG Camp 3:00 p.m. - 8:00 p.m.</p>	<p>9</p> <p>EVERYONE Band & CG Camp 3:00 p.m. - 8:00 p.m.</p>	<p>10</p>
<p>11</p>	<p>12</p> <p>EVERYONE Band & CG Camp 3:00 - 8:00 p.m.</p>	<p>13</p> <p>EVERYONE – Picture Day Band & CG Camp 1:00 p.m. - 6:00 p.m.</p> <p>Premiere Night!! AHS Track Stadium 6:00 p.m. – REQUIRED</p>	<p>14</p> <p>Start of School</p> <p>NO REHEARSAL TODAY</p>	<p>15</p> <p>EVERYONE Morning Practices Begin 7:00 a.m. Sharp!!</p>	<p>16</p> <p>EVERYONE Morning Practice 7:00 a.m.</p>	<p>17</p>
<p>18</p> <p>Don't forget to visit: www.allenband.com for the latest calendar and updates.</p>	<p>19</p> <p>EVERYONE Morning Practice 7:00 a.m.</p>	<p>20</p> <p>EVERYONE Morning Practice 7:00 a.m.</p>	<p>21</p> <p>EVERYONE Morning Practice 7:00 a.m.</p>	<p>22</p> <p>EVERYONE Morning Practice 7:00 a.m.</p>	<p>23</p> <p>EVERYONE Morning Practice 7:00 a.m.</p>	<p>24</p> <p>SAT</p>

2019-2020 Allen Band Registration Day

Saturday, July 27, 2019

During registration, there are a number of items each student must purchase, as well as several documents that must be collected. The fees for the school year are listed in the box to the right. ***Please note that AISD Uniform Items on Registration Day is the only tax-free day!*** Normally, registration takes approximately 2 hours from check in to check out. **It is very important that we collect all the fees for the upcoming school year on this day.** We expect 100% participation on this day. See you on Saturday, July 27th at the Allen High School PAC!

Registration Schedule:

Drum Majors & Percussion (Battery)	8:45 a.m.
Seniors	9:00 a.m.
Juniors	10:30 a.m.
Sophomores	12:30 p.m.
Freshmen (A-K)	2:30 p.m.
Freshmen (L-Z)	4:00 p.m.

Registration Checklist:

- ☐ Completed A.I.S.D. Performing Arts Permission and Emergency Release/Authorization (enclosed)
- ☐ Review the Band Handbook at www.allenband.com and be prepared to sign the acknowledgement form
- ☐ ***Forms of Payment: Credit Card, Check, or Cash***

REGISTRATION FEES

Payable to AISD:

Band Dri-Fit Shirt	\$20.00
Blue Uniform Undershirt	\$55.00
Black athletic shorts	\$25.00
Black Gloves	\$5.00
Black Marching Shoes	\$40.00
UIL/Gameday Refreshments	\$55.00
Uniform Cleaning	\$45.00
Ultimate Drill Book & App	\$25.00
School-Owned Instrument Fee	\$125.00

Optional

Payable to ABBA:

- *Booster Membership
- *Yard Sign
- *Additional Spirit Items (apparel)
(*indicates optional)

Costs vary. You can make any ABBA purchases on www.allenband.com. Go to the webstore on the site.

The Band Dri-Fit Shirt is worn when the full uniform is not necessary or appropriate. Students will be asked to wear their band Dri-Fit shirt with blue jeans or khaki shorts (khaki shorts preferred). **All band members are required to purchase a Dri-Fit Shirt for the 2019-2020 school year.**

The Blue Uniform Undershirt is a part of the formal marching band uniform. Since this will not change, you may continue using the same shirt if it is still in good shape and fits year after year.

The Band Athletic Shorts are our customized Nike running shorts suitable for wearing underneath our uniform at all times.

UIL/Game Day Refreshments: The band provides snacks and meals throughout the marching season.

Uniform Cleaning: The band provides cleaning for the marching uniform throughout the season and one concert uniform cleaning at the end of the concert season.

Ultimate Drill Book & App: Students will be provided a drill book specifically for their spot as well as a license for an online app.

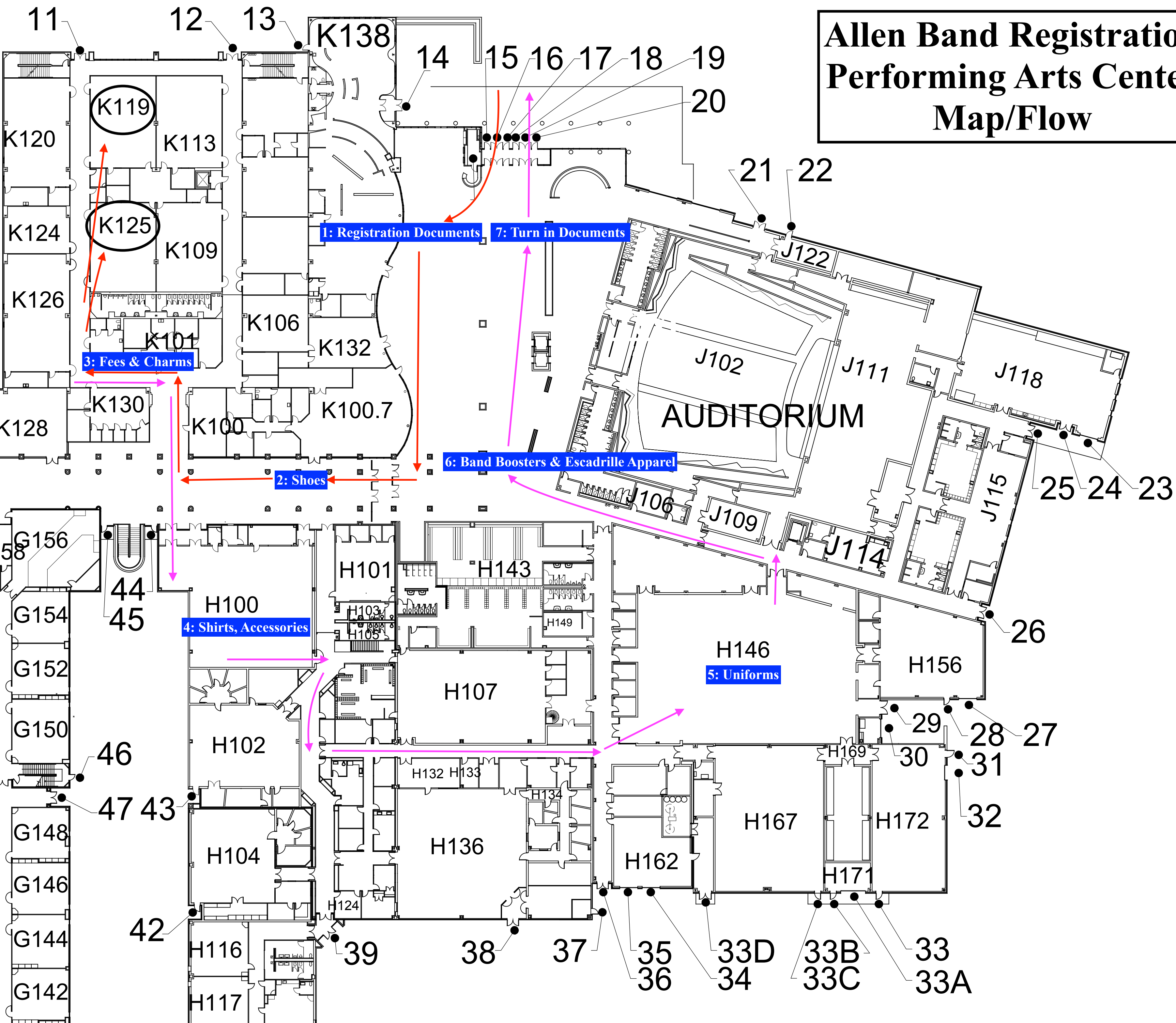
School Owned Instrument Fee:

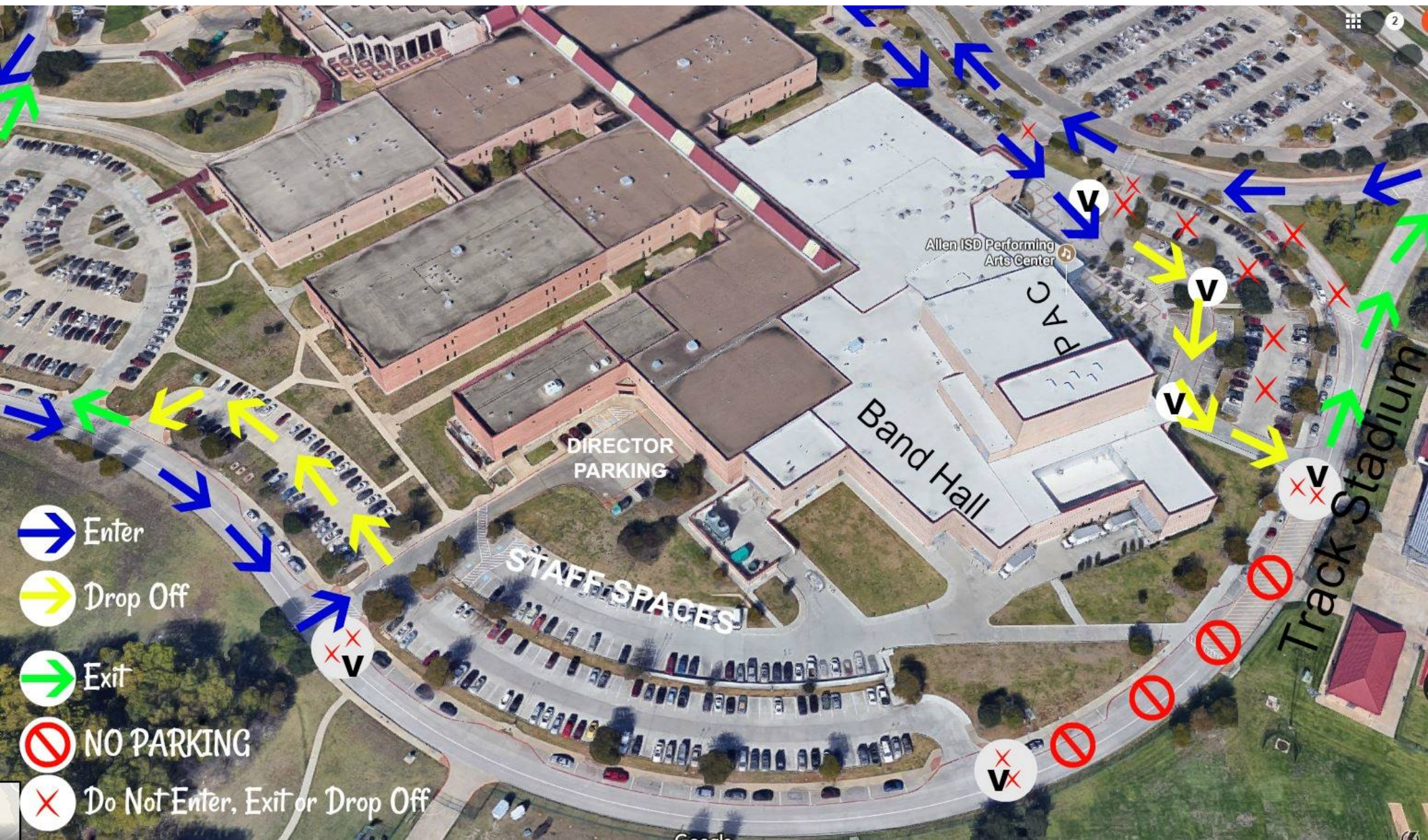
The following AISD owned instruments *require* a usage fee: Percussion, Oboe, Bassoon, Bass Clarinet, Tenor Saxophone, Bari Saxophone, Horn/Mellophone, Bass Trombone, Euphonium & Tuba. The current instrument usage fee is \$125.00 per year and covers only *part* of the yearly cleaning each instrument receives or in the case of percussion, general upkeep and drumhead replacement.

Music & Arts:

Representatives from Music & Arts will be on site to provide students with general supply needs for purchase (flip folders, extra flip folder windows, valve oil, reeds, lyres etc). Students who do not own a flip folder should purchase one (along with extra pages) on or before registration day. **Payment for these purchases should be made payable directly to Music & Arts.**

Allen Band Registration Performing Arts Center Map/Flow





Summer Band Necessities/Requirements

- Instrument w/ Mouthpiece, reeds, etc...
- All Music - PRINT OFF MUSIC SITE
- Lyre and Flip Folder
- Drill Charts
- Tennis shoes that lace tightly with socks (No loose shoes allowed)
- Weather appropriate clothing (please do not wear all black)
- Sun Screen, Hats, Sunglasses
- **ALLEN ISD STUDENTS ID CARD (for attendance, registration)**
- **NO SANDALS OR BOOTS OF ANY KIND FOR YOUR SAFETY!**

ACCEPTABLE Shoes: (Running Shoes or Cross Trainers)



NON-ACCEPTABLE Shoes: (Vans, Converse, Skaters shoes, boots, flip-flops, sandals)



- Water Jug: $\frac{1}{2}$ **Gallon** in black, red, blue, or grey. (no specific brand)



- This year you will need to have your water jug with you at all fall band activities including football games and contests.
- Be sure to have your name written on top of your jug for easy identification.

ALLEN ISD FINE ARTS

STUDENT/PARENT AUTHORIZATION & RELEASE
FOR OFF-CAMPUS ACTIVITIES

The Allen Independent School District (“AISD”) offers a variety of learning activities at designated off-campus locations in which students will have an opportunity to participate. I hereby give permission for my son/daughter to participate in the various off-campus activities associated with the Allen Fine Arts program. I understand that AISD may not provide transportation to and from all activities. Students are expected to use school transportation to and from ALL activities, if provided. In the event that AISD does not provide such transportation, I further understand that I must provide transportation for my son/daughter as a condition of his/her participation in that activity.

In consideration for allowing my son/daughter to participate in off-campus activities, I knowingly and voluntarily agree to assume full responsibility and assume all risk for any accident, loss, damage, and injuries he or she may sustain as a result of or arising out of any aspect of the activity. Furthermore, I, on behalf of myself, my son/daughter named below, our respective family members, and our respective heirs, legatees, executors, administrators, and assignees, hereby agree to release, acquit, discharge, and hold harmless AISD, the AISD Board of Trustees, and any agents, employees, representatives, insurers, successors, and assignees of the entities just named from any and all claims, demands, liabilities, actions or causes of action, of whatever kind or character, whether known or unknown, whether arising out of federal, state, or local statute or common law, including claims resulting from negligence, that I or my son/daughter may sustain arising out of any aspect of the off-campus activity, including, but not limited to, driving or riding to or from the off-campus activity.

PARENT/GUARDIAN – STUDENT RELEASE & AGREEMENT

I HAVE **READ** AND **DISCUSSED** ALL THE INFORMATION IN THE HANDBOOK WITH MY SON/DAUGHTER, AND I UNDERSTAND ITS CONTENTS AND MY RESPONSIBILITY AS TO THESE POLICIES AND CONSENT TO THEM AS A CONDITION OF PARTICIPATION IN ACTIVITIES. I UNDERSTAND THAT BY MY SIGNATURE BELOW, AND THAT OF MY SON/DAUGHTER, WE HAVE ACKNOWLEDGED THAT PARTICIPATION IN THE ALLEN ISD FINE ARTS COMES WITH A HIGHER STANDARD OF BEHAVIOR THAN THE ALLEN ISD STUDENT HANDBOOK AND THAT MY SON’S/DAUGHTER’S MEMBERSHIP AND PARTICIPATION IS CONDITIONED UPON ADHERENCE TO THOSE STANDARDS. MY SON/DAUGHTER HAS MY PERMISSION TO ATTEND DISTRICT AND OUT-OF-DISTRICT TRIPS. I UNDERSTAND THAT ALLEN ISD AND ALLEN HIGH SCHOOL WILL NOT BE LIABLE FOR INJURIES AND MEDICAL COST FOR STUDENTS. MY SIGNATURE ALSO SERVES AS PERMISSION FOR MY SON/DAUGHTER TO OBTAIN MEDICAL TREATMENT ON A SCHOOL-SPONSORED TRIP.

Student Name (PRINT)

Parent/Guardian Name (PRINT)

Student Signature

Date

Parent Signature

Date

ALLEN ISD FINE ARTS PERMISSION AND EMERGENCY RELEASE

As part of its educational program, the Allen Independent School District ("AISD") has organized a variety of educational and learning activities and trips in which your child will have an opportunity to participate. These trips and activities are designed to benefit students by providing unique learning experiences and exposure to new and different people and places in a supervised setting. School personnel will keep you informed of the upcoming activities in which your child will have the opportunity to participate.

I, the undersigned, the parent and/or legal guardian of the student identified below, a minor, hereby acknowledge that said minor is presently under my care, custody and control. I hereby give the student identified below my express permission to travel with school personnel on the educational enrichment activities and trips the school has planned and to participate in all scheduled activities involved in the trip or activity.

In the event of an emergency necessitating medical attention to the student identified below, I hereby authorize that treatment be given by qualified and licensed medical personnel. I understand that I will be notified as soon as possible and that all expenses incurred in treatment will be assumed either directly by me or by my insurance coverage as noted.

I acknowledge that liability of AISD, the AISD Board of Trustees, and any agents, employees, representatives, insurers, successors, and assignees of the entities just named, is narrowly defined and extremely limited by Texas law and local policy.

HEALTH AND MEDICAL QUESTIONNAIRE

Student's Name: _____ Sex _____ Age _____ Date of Birth ____/____/____
Last First MI

Present Address: _____
Street City State Zip

Parents or Legal Guardians: _____ Phone #1: _____ Phone #2: _____

Other responsible party: _____ Phone #1: _____ Phone #2: _____

Health Insurance Co.: _____ Policy Number: _____ Phone #: _____

Medical History of Student: (Please check Yes or No)						** Please check medication your child can receive		
	Yes	No		Yes	No		Yes	No
Diabetes	_____	_____	Dizziness	_____	_____	Acetaminophen (Tylenol)	_____	_____
Drug Allergies	_____	_____	Convulsions	_____	_____	Ibuprofen	_____	_____
Asthma	_____	_____	High Blood Pressure	_____	_____	Throat Lozenges/cough drops	_____	_____
Epilepsy	_____	_____	Heart Disease	_____	_____	Antacids (Tums)	_____	_____
Fainting Spells	_____	_____	Stomach Disorder	_____	_____	Lotions, Creams, ointments	_____	_____
Kidney Disease	_____	_____	Hay Fever	_____	_____	Diphenhydramine (Benadryl)	_____	_____
Liver Disease	_____	_____				Dramamine	_____	_____

Surgery/ies (within the last year): _____

Emotional problem (i.e. hyperventilation, hysteria): _____

Serious medical problems not mentioned above: _____

Tetanus (last injection date): _____ Allergies to drugs: _____

Allergies to foods & other agents: _____

List ANY medications the student might have cause to use on a trip (i.e. anti-convulsive, anti-histamine, insulin, any tranquilizer, etc.)

Please describe any medical/mental problems which the student might have which have not been covered on this form and about which you think the directors should know. _____

Parent/Guardian Signature

Date

Parent/Guardian Name (PRINT)

Student Name _____ Grade _____
PRINT LEGIBLY (Last) (First)

Graduation year _____

PARENT/STUDENT UIL MARCHING BAND ACKNOWLEDGEMENT FORM

No student may be required to attend practice for marching band for more than eight hours of rehearsal outside the academic school day per calendar week (Sunday through Saturday). This provision applies to students in all components of the marching band.

On performance days (football games, competitions and other public performances) bands may hold up to one additional hour of warm-up and practice beyond the scheduled warm-up time at the performance site. Multiple performances on the same day do not allow for additional practice and/or warm-up time.

Examples Of Activities Subject To The UIL Marching Band Eight Hour Rule.

- Marching Band Rehearsal (Both Full Band And Components)
- Any Marching Band Group Instructional Activity
- Breaks
- Announcements
- Debriefing And Viewing Marching Band Videos
- Playing Off Marching Band Music
- Marching Band Sectionals (Both Director And Student Led)
- Clinics For The Marching Band Or Any Of Its Components

The Following Activities Are Not Included In The Eight Hour Time Allotment:

- Travel Time To And From Rehearsals And/Or Performances
- Rehearsal Set-Up Time
- Pep Rallies, Parades And Other Public Performances
- Instruction And Practice For Music Activities Other Than Marching Band And Its Components

NOTE: An extensive Q&A for the Eight Hour Rule for Marching Band can be found on the Music Page of the UIL Web Site at: www.uil.utexas.edu

“We have read and understand the Eight-Hour Rule for Marching Band as stated above and agree to abide by these regulations.”

Parent Signature _____ Date _____

Student Signature _____ Date _____

This form is to be kept on file by the local school district.

PREPARTICIPATION PHYSICAL EVALUATION -- MEDICAL HISTORY

2017

This **MEDICAL HISTORY FORM** must be completed *annually* by parent (or guardian) and student in order for the student to participate in activities. These questions are designed to determine if the student has developed any condition which would make it hazardous to participate in an event.

Student's Name: (print) _____ Sex _____ Age _____ Date of Birth _____
 Address _____ Phone _____
 Grade _____ School _____
 Personal Physician _____ Phone _____
In case of emergency, contact:
 Name _____ Relationship _____ Phone (H) _____ (W) _____

Explain "Yes" answers in the box below**. Circle questions you don't know the answers to.

	Yes	No		Yes	No
1. Have you had a medical illness or injury since your last check up or physical?	<input type="checkbox"/>	<input type="checkbox"/>	13. Have you ever gotten unexpectedly short of breath with exercise?	<input type="checkbox"/>	<input type="checkbox"/>
2. Have you been hospitalized overnight in the past year?	<input type="checkbox"/>	<input type="checkbox"/>	Do you have asthma?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever had surgery?	<input type="checkbox"/>	<input type="checkbox"/>	Do you have seasonal allergies that require medical treatment?	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you ever had prior testing for the heart ordered by a physician?	<input type="checkbox"/>	<input type="checkbox"/>	14. Do you use any special protective or corrective equipment or devices that aren't usually used for your activity or position (for example, knee brace, special neck roll, foot orthotics, retainer on your teeth, hearing aid)?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever passed out during or after exercise?	<input type="checkbox"/>	<input type="checkbox"/>	15. Have you ever had a sprain, strain, or swelling after injury?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever had chest pain during or after exercise?	<input type="checkbox"/>	<input type="checkbox"/>	Have you broken or fractured any bones or dislocated any joints?	<input type="checkbox"/>	<input type="checkbox"/>
Do you get tired more quickly than your friends do during exercise?	<input type="checkbox"/>	<input type="checkbox"/>	Have you had any other problems with pain or swelling in muscles, tendons, bones, or joints?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever had racing of your heart or skipped heartbeats?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, check appropriate box and explain below:		
Have you had high blood pressure or high cholesterol?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Head	<input type="checkbox"/> Elbow	<input type="checkbox"/> Hip
Have you ever been told you have a heart murmur?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Neck	<input type="checkbox"/> Forearm	<input type="checkbox"/> Thigh
Has any family member or relative died of heart problems or of sudden unexpected death before age 50?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Back	<input type="checkbox"/> Wrist	<input type="checkbox"/> Knee
Has any family member been diagnosed with enlarged heart, (dilated cardiomyopathy), hypertrophic cardiomyopathy, long QT syndrome or other ion channelopathy (Brugada syndrome, etc), Marfan's syndrome, or abnormal heart rhythm?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Chest	<input type="checkbox"/> Hand	<input type="checkbox"/> Shin/Calf
Have you had a severe viral infection (for example, myocarditis or mononucleosis) within the last month?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Shoulder	<input type="checkbox"/> Finger	<input type="checkbox"/> Ankle
Has a physician ever denied or restricted your participation in activities for any heart problems?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Upper Arm	<input type="checkbox"/> Foot	
4. Have you ever had a head injury or concussion?	<input type="checkbox"/>	<input type="checkbox"/>	16. Do you want to weigh more or less than you do now?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been knocked out, become unconscious, or lost your memory?	<input type="checkbox"/>	<input type="checkbox"/>	17. Do you feel stressed out?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, how many times? _____			18. Have you ever been diagnosed with or treated for sickle cell trait or sickle cell disease?	<input type="checkbox"/>	<input type="checkbox"/>
When was your last concussion? _____			<i>Females Only</i>		
How severe was each one? (Explain below)			19. When was your first menstrual period? _____		
Have you ever had a seizure?	<input type="checkbox"/>	<input type="checkbox"/>	When was your most recent menstrual period? _____		
Do you have frequent or severe headaches?	<input type="checkbox"/>	<input type="checkbox"/>	How much time do you usually have from the start of one period to the start of another? _____		
Have you ever had numbness or tingling in your arms, hands, legs or feet?	<input type="checkbox"/>	<input type="checkbox"/>	How many periods have you had in the last year? _____		
Have you ever had a stinger, burner, or pinched nerve?	<input type="checkbox"/>	<input type="checkbox"/>	What was the longest time between periods in the last year? _____		
5. Are you missing any paired organs?	<input type="checkbox"/>	<input type="checkbox"/>	<i>Males Only</i>		
6. Are you under a doctor's care?	<input type="checkbox"/>	<input type="checkbox"/>	20. Do you have two testicles? _____		
7. Are you currently taking any prescription or non-prescription (over-the-counter) medication or pills or using an inhaler?	<input type="checkbox"/>	<input type="checkbox"/>	21. Do you have any testicular swelling or masses? _____		
8. Do you have any allergies (for example, to pollen, medicine, food, or stinging insects)?	<input type="checkbox"/>	<input type="checkbox"/>			
9. Have you ever been dizzy during or after exercise?	<input type="checkbox"/>	<input type="checkbox"/>			
10. Do you have any current skin problems (for example, itching, rashes, acne, warts, fungus, or blisters)?	<input type="checkbox"/>	<input type="checkbox"/>			
11. Have you ever become ill from exercising in the heat?	<input type="checkbox"/>	<input type="checkbox"/>			
12. Have you had any problems with your eyes or vision?	<input type="checkbox"/>	<input type="checkbox"/>			

An individual answering in the affirmative to any question relating to a possible cardiovascular health issue (question three above), as identified on the form, should be restricted from further participation until the individual is examined and cleared by a physician, physician assistant, chiropractor, or nurse practitioner.

**EXPLAIN 'YES' ANSWERS IN THE BOX BELOW (attach another sheet if necessary):

It is understood that even though protective equipment is worn by athletes, whenever needed, the possibility of an accident still remains. Neither the University Interscholastic League nor the school assumes any responsibility in case an accident occurs.

If, in the judgment of any representative of the school, the above student should need immediate care and treatment as a result of any injury or sickness, I do hereby request, authorize, and consent to such care and treatment as may be given said student by any physician, athletic trainer, nurse or school representative. I do hereby agree to indemnify and save harmless the school and any school or hospital representative from any claim by any person on account of such care and treatment of said student.

If, between this date and the beginning of participation, any illness or injury should occur that may limit this student's participation, I agree to notify the school authorities of such illness or injury.

I hereby state that, to the best of my knowledge, my answers to the above questions are complete and correct. Failure to provide truthful responses could subject the student in question to penalties determined by the UIL

Student Signature: _____ Parent/Guardian Signature: _____ Date: _____

Any Yes answer to questions 1, 2, 3, 4, 5, or 6 requires further medical evaluation which may include a physical examination. Written clearance from a physician, physician assistant, chiropractor, or nurse practitioner is required before any participation in UIL practices, games or matches. **THIS FORM MUST BE ON FILE PRIOR TO PARTICIPATION IN ANY PRACTICE, SCRIMMAGE, PERFORMANCE OR CONTEST BEFORE, DURING OR AFTER SCHOOL.**

For School Use Only:

This Medical History Form was reviewed by: Printed Name _____ Date _____ Signature _____

PREPARTICIPATION PHYSICAL EVALUATION -- PHYSICAL EXAMINATION

Student's Name _____ Sex _____ Age _____ Date of Birth _____

Height _____ Weight _____ % Body fat (optional) _____ Pulse _____ BP _____/_____/_____ (_____/_____, ____/_____) brachial blood pressure while sitting

Vision: R 20/____ L 20/____ Corrected: ☐ Y ☐ N Pupils: ☐ Equal ☐ Unequal

As a minimum requirement, this **Physical Examination Form** must be completed prior to junior high participation and again prior to first and third years of high school participation. It **must** be completed if there are yes answers to specific questions on the student's MEDICAL HISTORY FORM on the reverse side. * **Local district policy may require an annual physical exam.**

	NORMAL	ABNORMAL FINDINGS	INITIALS*
MEDICAL			
Appearance			
Eyes/Ears/Nose/Throat			
Lymph Nodes			
Heart-Auscultation of the heart in the supine position.			
Heart-Auscultation of the heart in the standing position.			
Heart-Lower extremity pulses			
Pulses			
Lungs			
Abdomen			
Genitalia (males only)			
Skin			
Marfan's stigmata (arachnodactyly, pectus excavatum, joint hypermobility, scoliosis)			

MUSCULOSKELETAL

Neck			
Back			
Shoulder/Arm			
Elbow/Forearm			
Wrist/Hand			
Hip/Thigh			
Knee			
Leg/Ankle			
Foot			

*station-based examination only

CLEARANCE

☐ Cleared

☐ Cleared after completing evaluation/rehabilitation for: _____

☐ Not cleared for: _____ Reason: _____

Recommendations: _____

The following information must be filled in and signed by either a Physician, a Physician Assistant licensed by a State Board of Physician Assistant Examiners, a Registered Nurse recognized as an Advanced Practice Nurse by the Board of Nurse Examiners, or a Doctor of Chiropractic. Examination forms signed by any other health care practitioner, will not be accepted.

Name (print/type) _____ Date of Examination: _____

Address: _____

Phone Number: _____

Signature: _____

Must be completed before a student participates in any practice, before, during or after school, (both in-season and out-of-season) or performance/games/matches.