

PERMISSION FORM

To be completed by the student:

I, _____, hereby agree to the attached arrangements,
Print name of student
rules, and regulations for this trip indicated in the BOE policy and WDHS Music
Department guidelines.

Signature of Student: X _____ **Date:** _____

To be completed by the parent/guardian:

I, _____, hereby agree to the attached arrangements,
Print name of parent/guardian
rules, and regulations for this trip indicated in the BOE policy and WDHS Music
Department guidelines and place my son/daughter in the custody of the
designated chaperones during his/her participation in the band to **Camp
Ramblewood in Darlington, MD from August 12th – August 16th, 2018.**

Signature of Parent/Guardian: X _____ **Date:** _____

Required – regardless of student's age

Note: Please complete the medical release form on opposite side before returning.