PERMISSION FORM

Ref: Board Policy Chapter 8

Title: Instruction

Section: 8.8.2.0

To be completed by the student:	
	, hereby agree to the attached arrangements, adicated in the BOE policy and WDHS Music
Department guidelines.	
Signature of Student: X	Date:
To be completed by the parent/guardian:	
I,Print name of parent/guardian	, hereby agree to the attached arrangements,
, g	ndicated 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 13th – August 17th, 2023.	
Signature of Parent/Guardian: X	Date:
	Required – regardless of student's age

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