

## PERMISSION FORM

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***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:** \_\_\_\_\_

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***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 10th – August 14th, 2025.**

**Signature of Parent/Guardian: X** \_\_\_\_\_ **Date:** \_\_\_\_\_

Required – regardless of student's age

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