

**Huron Valley Marching Band 2024  
Parent and Student Approval Form**

Student Name: \_\_\_\_\_  
Last First

Student's Primary Residence:

Home Address: \_\_\_\_\_  
Street Address

Home Phone # \_\_\_\_\_

City Zip Code

Parent(s)/Guardian Name: \_\_\_\_\_/\_\_\_\_\_

Work Phone # \_\_\_\_\_

Parent(s) Date of Birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Second Parent Name: \_\_\_\_\_  
(if not residing at above household)

Home Phone # \_\_\_\_\_

Work Phone # \_\_\_\_\_

Home Address: \_\_\_\_\_  
Street Address

City Zip Code

Emergency Contact Person (if parents are not available)

Name: \_\_\_\_\_

Home Phone # \_\_\_\_\_

Home Address: \_\_\_\_\_  
Street Address

Work Phone # \_\_\_\_\_

City Zip Code

We carry personal accident/health insurance:

Yes \_\_\_\_\_ No \_\_\_\_\_

Name of Subscriber: \_\_\_\_\_

**PLEASE ATTACH A COPY  
OF BOTH SIDES OF YOUR  
INSURANCE CARD**

Name of Company: \_\_\_\_\_

Contract # \_\_\_\_\_

Policy # \_\_\_\_\_

**Student Agreement**

I am aware of and agree to abide with the School Code of Conduct of the Huron Valley School District while involved in Band activities both on and off school premises. Failure to abide could result in disciplinary actions up to and including expulsion.

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

Date \_\_\_\_\_

**Parent Agreement and Notarization Form**

I hereby give my consent for the above named student to engage in Huron Valley Marching Band activities and to accompany the band on its trips. The school is not liable for injuries or the cost of medical care resulting from any injuries. I hereby give my permission for immediate medical care if needed to the above named student.

We carry in our first aid supplies basic over the counter medications. Please check off all that we may administer to your student.

Tylenol  Advil  Aspirin  cough drops  throat lozenges  cold/sinus medication  benadryl  mucinex  sudafed  
 over the counter allergy medications

**Notary Seal Here - for out-of state trips.**

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

Notarized by \_\_\_\_\_

Date \_\_\_\_\_