

METROPOLITAN NASHVILLE PUBLIC SCHOOLS
Certificates Approving Marching Band Participation

STUDENT NAME _____

PARENT CERTIFICATE OF CONSENT

PARENT OR GUARDIAN PLEASE READ AND SIGN

I hereby give my consent for my son or daughter to participate in the marching band sponsored by _____ High School. I release said school, Metropolitan Nashville Public Schools and their agents from all liability for injuries received by my son or daughter during or resulting from this program, whether during practice or at a performance. In addition, I hereby release _____ High School, Metropolitan Nashville Public Schools and their agents from all liability for injuries received by the participant while in route to or from performances that are held at locations other than said school.

Permission is hereby granted for such initial or emergency medical care as may be available as a result of injury incurred during a practice or performance.

Signature of Parent/Guardian

I have received, read and understand the *HELPFUL HINTS AND GUIDELINES FOR PARENTS AND STUDENTS FOR HANDLING HEAT STRESS AND EXERCISE*.

I also understand that a marching band member must live in the same school zone where he/she plays in marching band, be a student at a paired magnet school or receive a special approval by the Transfer Committee before he/she will be allowed to participate in the marching band program at the out-of-zone school.

Signature of Parent/Guardian

INSURANCE CERTIFICATE

My son or daughter is covered by adequate medical insurance.

School Insurance ___ Yes ___ No

Primary Medical/Health and Accident Insurance – Family Insurance Policy

Name of Company

Subscriber's I.D. No

Group No.

Social Security No.

Secondary Medical/Health Insurance – Family Insurance Policy

Name of Company

Subscriber's I.D. No

Group No.

Social Security No.

Signature of Parent/Guardian

Date