

CR North Indoor Drumline Membership Contract - 2022

Discipline

The CR North Indoor Drumline is an extension of CR North High School and the Music Department. Therefore, all school rules apply for all rehearsals and competitions. The staff reserves the right to report any violations of the students to the high school administration. Any student who becomes academically ineligible through the course of the season will be put on probation until allowed to resume by the school.

Attendance

We do not have much time to put together a full show. Unlike marching band, we do not have 2 weeks of practicing all day. Every rehearsal is very important. Each member is expected to attend all rehearsals and performances. Show up to rehearsal early: Rehearsal starting at 6 means you are set up with everything you need AT 6, not arriving at 6.

Excused Absences:

- Illness - with a parent notification
- Death in the family with parent notification
- Religious conflicts – with parent notification
- Doctor's Appointments
- Absence from school (or leaving early from school due to illness) the day of a rehearsal

A schedule for the year is attached to this packet. *The schedule is subject to change! A more final version of the schedule will be available in December.* Please use the attached form to list any conflicts with the schedule.

If attendance becomes an issue, your membership in the ensemble will be in jeopardy. Excessive absences will lead to your dismissal from the ensemble. Alleviate most issues by communicating with the staff (NOT contacting other members to tell the staff). We understand things come up; the best thing you can do is communicate any potential issues EARLY; that way we can help and work with you.

Teamwork

This is a *team* activity, and unlike most sports, practices are not just about improving skills. Most of the time, we are teaching new music, drill, or visuals. You are the only one that knows your specific part, and your absence affects everyone in the group. This is not only about drumming; it is learning about commitment, time management and responsibility.

Rehearsals/Practice

Every member needs to take responsibility for their own parts for us to be successful. Rehearsals are for rehearsing; practicing (and learning your music) needs to happen at home. Be respectful of everyone else's time by being prepared for rehearsals. This means learning your music and practicing at home so we can all get better together during rehearsals.

Health/Safety

Indoor drumline is very physically demanding; you will be moving a LOT. Put yourself in a position to succeed by staying active and eating/hydrating well. Any injured member must submit a note from their doctor or physical therapist before actively participating in Drumline rehearsals/competitions.

Transportation

Students are required to travel as a team to and from competitions. Bus transportation will be provided on show days. In the event a student needs to leave early, they must receive approval from staff beforehand. A parent needs to notify the staff of this.

Always be prepared

- Water!!
- Wear athletic clothing and sneakers
- No cell phones during rehearsal
- No gum
- Always have appropriate equipment and materials for rehearsals and competitions

Fees

The fee for the 2022 Indoor Drumline will be \$250. This will cover the uniform (which will be yours at the end of the season), equipment such as sticks, mallets, heads, etc, and show shirts.

Throughout the season, there will be several fundraisers. Some fundraisers will give you the opportunity to lower your dues. This amount will be subtracted from the balance due in February, and if you have earned more than \$100, then you will be issued a refund.

1st Payment of \$150.00 due by 12/9/21

2nd Payment of \$100.00 due by 2/15/22

Or feel free to pay full \$250.00

Make checks payable to CRBPA and turn into Michael Kanner, Megan Van Zelst, or put in the drop box in the bandroom (make sure you put the check in an envelope labeled "Drumline Dues" and with your name).

Michael Kanner, Director

kannermg@gmail.com

Megan Van Zelst, CRBPA Drumline Chair

meganvanzelst@gmail.com

CRN Indoor Drumline 2022 Schedule

December

6: Rehearsal 6-9pm (Battery only)
9: Rehearsal 6-9pm (Pit only)
13: Rehearsal 6-9pm (Battery only)
16: Rehearsal 6-9pm (Pit only)
18: Rehearsal 9-3
20: Rehearsal 6-9pm

January

3: Rehearsal 6-9pm
6: Rehearsal 6-9pm
8: Rehearsal 8-3
10: Rehearsal 6-9pm
13: Rehearsal 6-9pm
20: Rehearsal 6-9pm
22: Rehearsal 8-3
24: Rehearsal 6-9pm
27: Rehearsal 6-9pm
31: Rehearsal 6-9pm

February

3: Rehearsal 6-9pm
7: Rehearsal 6-9pm
10: Rehearsal 6-9pm
12: Rehearsal 8-3
14: Rehearsal 6-9pm
17: Rehearsal 6-9pm
24: Rehearsal 6-9pm
26: TBD (Rehearsal day OR competition)
28: Rehearsal 6-9pm

March

3: Rehearsal 6-9pm
5: Competition
7: Rehearsal 6-9pm
10: Rehearsal 6-9pm
14: Rehearsal 6-9pm
17: Rehearsal 6-9pm
19: Competition
21: Rehearsal 6-9pm
24: Rehearsal 6-9pm
26: Competition (TBD)
28: Rehearsal 6-9pm
31: Rehearsal 6-9pm

April

2: Competition
4: Rehearsal 6-9pm
7: Rehearsal 6-9pm
9: TBD (Rehearsal day OR MAPS Finals)
11: Rehearsal 6-9pm
21: Rehearsal 6-9pm
23: Competition (Region Championships)
25: Rehearsal 6-9pm
28-May 1: Championships (Wildwood, NJ)

Please note this schedule is subject to change. Stay updated with the Drumline Google Calendar, emails, and other notifications sent throughout the season.

CR North Indoor Drumline Commitment Contract - 2022

I plan to be a member of the CR North Indoor Drumline. I have read and understand the schedule, policies, and procedures as presented in the Drumline Commitment Contract, and understand the commitment that is necessary. I understand that success for the drumline is dependent on each member's contribution, and I will do my best to always be present. I understand that missing rehearsal or performance obligations will put my membership in jeopardy. I have listed any known conflicts with the schedule on the back of this page.

Student's Full Name: _____ Signature: _____ Date: _____

My child has permission to participate in all activities of the CR North Indoor Drumline. I have read and understand the schedule, policies, and procedures and understand the rehearsal and performance obligations.

Student's Full Name: _____ Signature: _____ Date: _____

Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement

I/We, _____, do hereby agree that:

(Parent name(s))

The Council Rock Marching Band Parent Association, Inc. ("CRBPA") is comprised of parents of students who participate in the musical activities conducted by the Council Rock High School marching band ("Marching Band"), including the Indoor Drumline ("Drumline"). Further, the Drumline program requires the efforts of many parent volunteers, without which the Drumline program would not be possible in its current scope. In consideration of all such efforts on the part of volunteer officers, directors and members that directly or indirectly benefit my child/children and the program in general, I/we, as parent(s), custodial parent(s) and/or guardian(s) with legal responsibility for Drumline member:

_____ do hereby agree and affirmatively state the following:

(Student name)

1. I/we understand that Drumline activities include but are not limited to practice, travel, competitions, fundraising and social activities, any or all of which may be supported by the CRBPA. My child is in good health and in proper physical condition to participate in Drumline activities;
2. I/we fully understand that: Drumline activities involve risks and dangers of bodily injury which may be caused by my child's actions, or inactions, the actions or inactions of others, the conditions in which the activity takes place, or the negligence of others. I/we I fully accept and assume all such risks and all responsibility for losses, costs, and damages I/we incur, or my child incur, as a result of participation in Drumline activities;
3. I/we hereby release, discharge, and covenant not to institute legal proceedings of any kind against the CRBPA, its respective directors, officers, members, volunteers, and employees, and owners and lessors of premises on which the activity takes place ("Releasees"), from all liability, claims, demands, losses, or damages on my account or my child's account caused or alleged to be caused in whole or in part by the negligence of Releasees; and I further agree that if anyone on my behalf or on behalf of my child make(s) a claim against any Releasees, I will indemnify, save, and hold harmless the Releasees from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as a result of such claim.
4. I/we have read this Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement ("Agreement"), and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this Agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

X _____ Date _____ Rev A - 11/28/21

(Parent Signature)

Name: _____

Please list below any conflicts (with reasons) with the provided schedule.

**COUNCIL ROCK MUSIC DEPARTMENT
EMERGENCY MEDICAL FORM**

Dear Parent/Guardian:

In the event that your son/daughter requires medical attention while participating during a Music Department function, we request your authorization to act until you may be reached/available. Please read and complete the statement below. Your signature will provide the authorization that we will need. Thank you for returning this medical form to the Music Department, IMMEDIATELY.

STUDENT NAME _____ BIRTH DATE _____

HOME ADDRESS _____

_____ HOME PHONE _____

FATHER'S NAME _____ WORK PHONE _____

MOTHER'S NAME _____ WORK PHONE _____

Please name an alternate parent or family member that may be contacted in an emergency.

NAME _____ PHONE _____

HEALTH INSURANCE CARRIER _____ POLICY NO _____

PHYSICIAN'S NAME _____

ADDRESS _____ PHONE/FAX _____

Please note any medical condition of which we should be aware. _____

ALLERGIES _____

TETANUS BOOSTER _____ SPECIAL DIET: Diabetic _____ Other _____
date

PRESENT MEDICATIONS _____

In the event that I cannot be reached and my son/daughter requires medical attention, I authorize a representative from the Council Rock School District to act in my behalf.

PARENT/GUARDIAN SIGNATURE _____ DATE _____

The school nurses have standing orders from the school physician to administer **Acetaminophen** (generic Tylenol) and **Ibuprofen** (generic Advil/Motrin) when necessary. I give my consent for my child to receive these medications when medically indicated.

PARENT/GUARDIAN SIGNATURE _____ DATE _____