

October 2020

Dear Parents,

We are excited to offer your child the opportunity to participate in the **High Note Festival on Friday, May 15, 2020 at Hershey Park!** The Hamburg Area Middle School Concert Choir, Orchestra, 6<sup>th</sup> Grade Band, and 7th-8th Grade Band will be adjudicated at a designated performance location in the morning. After all ensembles have performed, the entire music department will travel to the park for the remainder of the afternoon and evening. **Students should plan on an approximate arrival time of 7:30am and an approximate return time of 8:30pm.**

The cost for this year's festival is **\$92** which covers the park ticket, a picnic lunch, and transportation. Students may either pay by installments with the last payment due Friday, March 6, 2020 or you may pay the entire amount in full by Friday, January 24, 2020. You may complete a Music Association Grant Fund Request Form to cover the **second and/or third** installment. Students should also plan to bring additional spending money for their afternoon at the park. The attached forms, which your child must return to Mr. Watson, Mrs. Dowd, Mrs. Freeman, or Mrs. Kline, also includes important information regarding your consent for participation in the trip as well as other policy information.

Students participating in The High Note Festival are expected to be members of the music team and must remember that they are representatives of the Hamburg Area School District while attending the Festival. All rules and regulations in the Student Handbook and the applicable policies of the Hamburg Area School District shall remain in effect for the entire trip.

Our Choir, Orchestra, and Band members must be in full uniform to perform and should continue to wear their uniform throughout the day at the park. Our full uniform will consist of the **red HAMS Music t-shirt, jeans/shorts/khakis, and sneakers**. If you do not own a HAMS Music shirt, you may purchase one using the attached order form. Checks should be addressed to **HAMS ACTIVITY FUND**. **Additional details will be forthcoming regarding departure and return times.**

Please read and complete the Parental Consent Form and the HASD Medical Form. Return the completed forms and submit your first payment by **Friday, November 8, 2019**. Return your remaining payments with the attached coupons. All checks should be addressed to **HAMS ACTIVITY FUND**.

We would love for **all** Choir, Orchestra, and Band students to participate in this event. If you have any questions, please don't hesitate to contact one of the directors. Thank you for your support of the Hamburg Area Middle School Music Program!

Sincerely,

Mr. Benjamin Watson  
Choir Director  
[benwat@hasdhawks.org](mailto:benwat@hasdhawks.org)

Mrs. Angela Dowd  
Orchestra Director  
[angdow@hasdhawks.org](mailto:angdow@hasdhawks.org)

Mrs. Carey Freeman  
Band Director (6<sup>th</sup> Grade Band)  
[carfre@hasdhawks.org](mailto:carfre@hasdhawks.org)

Mrs. Megan Kline  
Band Director (7th & 8th Grade Band)  
[megkli@hasdhawks.org](mailto:megkli@hasdhawks.org)

**Parental Consent and Payment Plan Form  
High Note Music Festival  
Hamburg Area Middle School Music Department**

I give my child permission to participate in the High Note Festival. Transportation via school bus will be provided from Hamburg Area Middle School to our designated performance location; from our designated location to the park; and from the park back to Hamburg Area Middle School. I understand that I am responsible for picking my child up from the Middle School in a timely fashion when the students return. I also understand that my child will be a representative of the Hamburg Area School District. If my child exhibits behavior that violates any part of the Middle School Disciplinary Code, I will be notified to pick up my child and I will not receive a refund. I also understand that I will provide a red, HAMS Music shirt, if my child does not already own one.

My child's reservation for the festival is confirmed when full payment is received.

Parent or Guardian Name (print): \_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_

Student Name (print): \_\_\_\_\_

Grade: \_\_\_\_\_

\*\*\* If you are a member of multiple ensembles, please return your forms and payments to the following director:

- 6th Grade Band - ALL Members - Mrs. Freeman
- Choir and 7/8 Band – Mrs. Kline
- Choir and Orchestra – Mrs. Dowd
- Orchestra and 7/8 Band – Mrs. Dowd
- Choir, Band, and Orchestra – Mrs. Dowd
  - Orchestra ONLY – Mrs. Dowd
  - 7/8 Band ONLY – Mrs. Kline
  - Choir ONLY – Mr. Watson

**PARENTS:** Please check the box if you are interested in participating as a chaperone. The chaperone fee will be an additional **\$65** which includes the park admission, a picnic lunch, and transportation. Chaperones are also required to complete the HASD Volunteer Packet which can be found on the HASD Website under the "Parents" tab. You will need to apply and submit multiple PA Clearances in order to be approved by our School Board. If you were a board-approved chaperone last year, you only need to submit the 2019-2020 Volunteer Information Form. All forms should be submitted to the Hamburg Area Middle School main office.

**\*\* Please do not send your chaperone payment until you have been notified by a music director to do so \*\***

Complete this form and the HASD Medical form and return them to your respective music director along with your first payment by

**Friday, November 8, 2019.**

Checks need to be addressed to **HAMS ACTIVITY FUND**, otherwise they will be returned to you. \*There is an additional \$10 fee for returned checks\*

HAMBURG AREA SCHOOL DISTRICT  
**MEDICAL INFORMATION AND CONSENT FORM**

Hamburg Area School District is requesting medical information in the event of an emergency. HASD will make every effort to contact parents/guardians. Authorized school representatives will act on your student's behalf should the need arise.

Student's Name: \_\_\_\_\_

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

Phone Numbers:

Home Phone: \_\_\_\_\_

Cell Phone #1: \_\_\_\_\_ Name: \_\_\_\_\_

Cell Phone #2: \_\_\_\_\_ Name: \_\_\_\_\_

Emergency Phone: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Describe any significant medical conditions/history that would interfere with travel, athletics, or daily living while on this trip (allergies, asthmas, diabetes, any severe conditions, etc.).

\_\_\_\_\_  
\_\_\_\_\_

Does the student take any medications that will need to be administered on the trip? \_\_\_ Y \_\_\_ N

\*Any medications needed on the trip should be logged in with and given to the trip coordinator.

Please list any medications that your child might be on: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

List any food allergies or special dietary concerns: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Insurance Information

Primary Policy Holder: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

## Payment Coupons

Use the slips below to accompany your payment installments. If full payment is problematic and your child would like to participate, call Mr. Watson at 610-562-2241, ext. 3800; Mrs. Kline, ext. 2147; Mrs. Freeman, ext. 3902; or Mrs. Dowd, ext. 4147 to discuss other options. We would like every student to participate.

If you would like to use existing funds from your student's HAMA Student Grant Fund toward the second and/or third payment, please return the coupons below along with the HAMA Student Account Funds Request Form.

Please return the coupons along with each payment (*make checks payable to HAMS ACTIVITY FUND*) in a sealed envelope to Mr. Watson, Mrs. Dowd, Mrs. Freeman or Mrs. Kline.

-----Cut along dotted line -----

**PAY IN FULL** (Due Friday, January 24, 2020) - **\$92**

Parent or Guardian Name (print) \_\_\_\_\_

Parent or Guardian Signature \_\_\_\_\_

Student Name (print) \_\_\_\_\_ Grade \_\_\_\_\_

-----Cut along dotted line -----

### For use with Multiple Payments:

**3 - Third Payment** (Due Friday, March 6, 2020) - **\$30** Attach HAMA Student Grant Fund Request Form, if needed.

Parent or Guardian Name (print) \_\_\_\_\_

Parent or Guardian Signature \_\_\_\_\_

Student Name (print) \_\_\_\_\_ Grade \_\_\_\_\_

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**2 - Second Payment** (Due Friday, January 24, 2020) - **\$31** Attach HAMA Student Grant Fund Request Form, if needed.

Parent or Guardian Name (print) \_\_\_\_\_

Parent or Guardian Signature \_\_\_\_\_

Student Name (print) \_\_\_\_\_ Grade \_\_\_\_\_

-----Cut along dotted line -----

**1 - First payment** (Due Friday, November 8, 2019) - **\$31**

Parent or Guardian Name (print) \_\_\_\_\_

Parent or Guardian Signature \_\_\_\_\_

Student Name (print) \_\_\_\_\_ Grade \_\_\_\_\_

**Hamburg Area Middle School  
High Note Festival  
T-Shirt Order Form**

**(Please return to your Music Director by FRIDAY, JANUARY 24, 2020)**

Student(s) Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Circle all ensembles in which you participate:

CONCERT CHOIR / WINGS / ORCHESTRA / BAND

Please indicate the number of t-shirts you would like to order by the sizes listed below:

(Adult sizes)

_____ Small	(\$6 each)
_____ Medium	(\$6 each)
_____ Large	(\$6 each)
_____ X-Large	(\$6 each)
_____ 2X-Large	(\$7.25 each)
_____ 3X-Large	(\$7.25 each)



Total # of T-shirts: \_\_\_\_\_ Total Amount Due: \_\_\_\_\_

Payment may be cash or check. Checks should be made payable to:

**HAMS ACTIVITY FUND**

*Chaperones may purchase the t-shirt, but it is not a requirement. You may wear a plain red shirt on the day of the festival if you do not have the HAMS Music t-shirt :)*