



# ARCADIA HIGH SCHOOL

## MUSIC CLEARANCE

### Required Forms:

*Every Music Student and Color Guard Member **must** stop at the Music table at Apache Days and be cleared for registration.*

*To be cleared, please complete the attached forms and submit at the Music Club Station during Apache Days*

- **Emergency Contact Information**
- **Student Code of Ethics Form**

### Other Important Information:

- **Families are encouraged to join the Arcadia Music Club.**

The Music Club provides additional financial support to help ensure a quality instrumental music program at Arcadia high School. The fund raisers by the Arcadia Music Club each year pay for equipment and needs of the Band, Orchestra, Percussion and Color Guard.

- **Transportation Cost**  
**(\$150 – 1<sup>st</sup> Activity / \$100 – 2<sup>nd</sup> Activity.)**

**Make checks payable to “AHS”**

We are all fortunate to be in groups that perform and compete at some great locations. Getting everyone there takes buses and they cost money. With the ever higher fuel costs, buses are becoming more and more expensive. Your contribution to the transportation fund helps make **all** performances possible.

- **ASB Membership Card**  
**(\$55 ASB - check payable to “AHS” )**

**Save \$25 on the Yearbook w/ ASB Card (Yearbook + ASB = \$110)**

Did you know that the Band, Orchestra, Percussion, Choir, Chanteurs, and Color Guard get a percentage of the ASB Card payment? The money goes straight to these groups to help offset the cost of trucks, sound equipment, competition fees, competition floors and more! That means less fundraising!!!! We expect 100% of the music students to purchase an ASB Card.

- **Instrument Use Donation**  
**(\$80, check payable to “AHS”)**

If you are using a school/district owned instrument, we request you pay the Instrument Use Donation. This money goes toward the repair of older instruments and purchase of new instruments and supplies. Students using the following school/district supplied instruments are requested to pay the donation: viola, cello, string bass, tenor and baritone saxophone, trombone, baritone, french horn, tuba or sousaphone, bass clarinet, oboe, bassoon and percussion.

We look forward to a great year!!

*Your Directors*



# ARCADIA HIGH SCHOOL **EMERGENCY CONTACT FORM** *For Music Students*

Student Last Name      Student First Name      Student E-mail      Class of      ID #:

Parent (1) Last Name      Parent (1) First Name      Parent (1)E-mail      Parent (1) Phone #

Parent (2) Last Name      Parent (2) First Name      Parent (2)E-mail      Parent (2) Phone #

Street Address      City      State      Zip

Emergency Contact Last Name      Emergency Contact First Name      Emergency Contact Phone # (1)      Emergency Phone # (2)

Physician Last Name      Physician First Name      Physician Phone #

Insurance Company      Insurance Certificate/Group #'s      Insurance Phone #

Known Allergies/Medical Conditions:	<b>IMPORTANT: Please Note!</b> <i>No insurance is provided for these activities by Arcadia Unified School District, Arcadia High School, or AHS Associated Student Body.</i>
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### **ACTIVITY – PLEASE CHECK ALL THAT APPLY**

- |   |   |   |                                      |
|---|---|---|--------------------------------------|
| <input type="checkbox"/> Orchestra 1    | <input type="checkbox"/> Orchestra 2    | <input type="checkbox"/> Orchestra 3    | <input type="checkbox"/> Color Guard |
| <input type="checkbox"/> Concert Band 1 | <input type="checkbox"/> Concert Band 2 | <input type="checkbox"/> Concert Band 3 | <input type="checkbox"/> Percussion  |
| <input type="checkbox"/> Choir          | <input type="checkbox"/> Chanteurs      | <input type="checkbox"/> New Spirit     |                                      |

- Parent signature on this form is the school official’s authorization to call any reference listed in case of emergency; and also authorizes your son/daughter to be transported to an event and return to school in order to participate in a school program or activity by either school or commercial bus. Special circumstances may require transportation by private automobile driven by teachers or parents.
- We, the undersigned, parent(s)/guardian(s) of the above named student, a minor, do hereby consent to any X-ray examination, anesthetic, medical, or surgical diagnosis or treatment and hospital service that may be rendered to said minor under the general or special instructions of the above name physician, M.D., at the number listed above or the Emergency Room Physician, whether such diagnosis or treatment is rendered at the office of said physician or at a hospital. It is understood that this consent is given in advance of any specific diagnosis or treatment being required, but is given to encourage said physician(s) to exercise his/her best judgment as to requirements of such diagnosis or treatment.
- This consent shall remain effective until revoked in writing, or until the end of the current school year, or until child’s 18<sup>th</sup> birthday.
- This authorization is given pursuant to the provision of Section 25.8 of the Civil Code of California.

*x*

Student Signature      Date

*x*

Parent (1 or 2) Signature      Date  
*Required for ALL Students regardless of age*

**INSTRUMENT RENTAL FORM: Student Copy**

If you are using a school/district owned instrument, we request you pay the Instrument Use Donation. The money goes toward the repair of older instruments and purchase of new instruments and supplies. Students using the following school/district supplied instruments are requested to pay the donation of \$80  
**(\$80 – Cash or Check payable to AHS – can be combined with other registration fees)**  
**Pay at ASB station in Apache Days**

Student Last Name	Student First Name	Student E-mail	Class of	ID #:
Parent (1) Last Name	Parent (1) First Name	Parent (1)E-mail	Parent (1) Phone #	
Parent (2) Last Name	Parent (2) First Name	Parent (2)E-mail	Parent (2) Phone #	
Street Address		City	State	Zip

<b><u>INSTRUMENT(S) RENTED: (Please Check)</u></b>				
<input type="checkbox"/> Percussion	<input type="checkbox"/> Viola	<input type="checkbox"/> Bassoon	<input type="checkbox"/> Trombone	<input type="checkbox"/> Bass Clarinet
<input type="checkbox"/> Tenor Saxophone	<input type="checkbox"/> Cello	<input type="checkbox"/> Sousaphone	<input type="checkbox"/> Oboe	<input type="checkbox"/> Other:
<input type="checkbox"/> Baritone Saxophone	<input type="checkbox"/> String Bass	<input type="checkbox"/> Tuba	<input type="checkbox"/> French Horn	

<b><u>OFFICIAL USE ONLY:</u></b>		
Instrument ID #	<input type="checkbox"/> CASH <input type="checkbox"/> CHECK: #	Initials:

**INSTRUMENT RENTAL FORM: District Copy**

If you are using a school/district owned instrument, we request you pay the Instrument Use Donation. The money goes toward the repair of older instruments and purchase of new instruments and supplies. Students using the following school/district supplied instruments are requested to pay the donation of \$80  
**(\$80 – Cash or Check payable to AHS – can be combined with other registration fees)**  
**Pay at ASB station in Apache Days**

Student Last Name	Student First Name	Student E-mail	Class of	ID #:
Parent (1) Last Name	Parent (1) First Name	Parent (1)E-mail	Parent (1) Phone #	
Parent (2) Last Name	Parent (2) First Name	Parent (2)E-mail	Parent (2) Phone #	
Street Address		City	State	Zip

<b><u>INSTRUMENT(S) RENTED: (Please Check)</u></b>				
<input type="checkbox"/> Percussion	<input type="checkbox"/> Viola	<input type="checkbox"/> Bassoon	<input type="checkbox"/> Trombone	<input type="checkbox"/> Bass Clarinet
<input type="checkbox"/> Tenor Saxophone	<input type="checkbox"/> Cello	<input type="checkbox"/> Sousaphone	<input type="checkbox"/> Oboe	<input type="checkbox"/> Other:
<input type="checkbox"/> Baritone Saxophone	<input type="checkbox"/> String Bass	<input type="checkbox"/> Tuba	<input type="checkbox"/> French Horn	

<b><u>OFFICIAL USE ONLY:</u></b>		
Instrument ID #	<input type="checkbox"/> CASH <input type="checkbox"/> CHECK: #	Initials:



# ARCADIA HIGH SCHOOL STUDENT CODE OF ETHICS

## Code of Ethics for Participation in Co-Curricular and Extra-Curricular Programs

Activities are an integral part of the school's total educational program. All school activities, co-curricular and extra-curricular, in the classroom and on the playing field, must be congruent with Arcadia High School's goals and objectives which are established for the intellectual, physical, social and moral development of our students. It is within this context that the following code of ethics is presented.

As a representative of Arcadia High School, I understand that it is my responsibility to:

- ◇ Place academic achievement as the highest priority
- ◇ Show respect for teammates, opponents, officials, and advisors/coaches
- ◇ Respect the integrity and judgment of officials or judges.
- ◇ Exhibit fair play, sportsmanship and proper conduct on and off the playing field, in the classroom, or other locations as determined by the competition or program.
- ◇ Maintain a high level of safety awareness.
- ◇ Refrain from the use of profanity, vulgarity, and other offensive language and gestures.
- ◇ Adhere to the established rules and standards of the game, competition, or contest to be played or participated in.
- ◇ Respect all equipment and use it safely and appropriately.
- ◇ Refrain from the use of alcohol, tobacco, illegal and non-prescriptive drugs, anabolic steroids or any substance to increase physical development or performance that is not approved by the United States Food and Drug Administration, Surgeon General of the United States or American Medical Association. (Attachment must be signed).
- ◇ Know and follow all State, C.I.F. section (athletics), and school rules and regulations pertaining to extra-curricular or co-curricular eligibility and participation.
- ◇ Win with character, lose with dignity.

## Code of Ethics-Substance Abuse Policy

I will not use, sell, and be in possession in any amount or under the influence of:

- alcohol (.01 or more)
- an illegal or look alike substance as listed in Chapter 2 of Division 10 of the health and safety code
- a controlled substance without a prescription during the regular school day or at any school related activity
- any form of tobacco

I will be immediately removed from any form of participation pertaining to the organization(s) represented by the code of conduct. Reinstatement will only occur upon my completion of the terms and conditions of the 1<sup>st</sup> offense.

I understand that school rules pertaining to other disciplinary action will also apply and that as a student representing Arcadia High School in a co-curricular or extra-curricular program, I accept the responsibility of being held accountable to the highest standards of behavior and conduct related to substance abuse.

**1<sup>st</sup> offense-** during the student's entire enrollment at Arcadia High School

- a. Write a 3 page paper outlining the reasons and facts of the violation in an honest and forthright manner. How the consequences to this action will affect myself, my family and my advisor/performing group, and how I hope to grow emotionally from this experience.
- b. attend an intervention program related to the offense
- c. Complete school or community service in the amount of 6 hours.
- d. Attend a mandatory summary conference with my parents, coach or advisor and the Assistant Principal of Athletics/Activities.

**2<sup>nd</sup> offense-** during the student's entire enrollment at Arcadia High School will result in **removal** from the team/organization for the remainder of the season. The student would be eligible to rejoin the team/organization at the start of the next season. In the case of an organization with no distinct seasons, the ineligible period would be one calendar year from the date of the offense.

**3<sup>rd</sup> offense-** will result in **permanent removal** from the extra-curricular program(s) for the duration of the student's enrollment at Arcadia High School.

### Anabolic Steroids and Performance Enhancing Drugs Supplements BP 5131.63 (b)

The student athlete pledges not to use androgenic/anabolic steroids and dietary supplements banned by the U.S. Anti-Doping Agency and the substance synephrine, unless the student has a written prescription from a licensed health care practitioner to treat a medical condition. A student who is found to have violated the agreement of this policy shall be restricted from participating in athletics and shall be subject to disciplinary procedures including, but not limited to, suspension or expulsion in accordance with law, Board policy, and administrative regulation.

## Informed Consent-Awareness of Injury Risk - Warning and Agreement

- By its very nature, participation in extra- or co-curricular activities can put students in situations in which SERIOUS, CATASTROPHIC, and perhaps FATAL accidents occur.
- Students and parents/guardian must assess the risks involved in such participation and make their choice to participate in spite of those risks. No amount of instruction, precaution or supervision will totally eliminate all risk of injury. Just as driving an automobile involves choice of risk; participation in athletics is inherently dangerous. The obligation of parents and students in making this choice to participate cannot be over-stated.
- By granting permission to your son/daughter to participate in the activities, a parent or guardian acknowledges that performing or practicing can be dangerous, involving MANY RISKS OF INJURY. Both the student and parent must understand that the dangers and risks of performing or practicing to perform include but are not limited to, death, complete or partial paralysis, brain damage, serious injury to virtually all internal organs, bones, joints, ligaments muscles, tendons and other aspects of the skeletal system and potential impairment to other aspects of the body, general health and well being.
- Because of the dangers of participating, the parent(s) and student recognize the importance of following advisors' instructions regarding techniques, training, other guidelines, etc. both in performance and practice and agree to obey such instructions.
- If any of the foregoing is not completely understood and you have questions, please contact the A.H.S. Assistant Principal in charge of Activities for further information.

By your signing this consent to participate you are acknowledging that you have read the above statements and understand them thoroughly. It is not a waiver of your right to pursue litigation in the event of negligence.

**I have read and understand the provisions of all the agreements and policies for Arcadia High School**

Student Last Name

Student First Name

Student E-mail

Class of ID #:

x

- Orchestra
- Band
- Color/Winter Guard
- Percussion
- Choral
- Chanteur/New Spirit

Student Signature

Date

Activity