

WESTER MIDDLE SCHOOL BAND

This letter contains preliminary information pertaining to our Spring Trip to the Sound Waves Music Festival at Schlitterbahn Water Park in New Braunfels on **May 20th**. The schedule for the day is still tentative, so I will pass along that information once it is finalized.

How do I get to go?

All Wester band students will be eligible to go on this trip with the following exceptions:

- 1) Students who fail any classes the fifth six weeks. A progress report will come out shortly before the trip that may allow a student to become eligible again for the trip. Full refunds are not guaranteed in the event that a student is unable to attend. We do not receive full refunds from any of the vendors involved (bus company and Schlitterbahn).
- 2) Students who have an unexcused absence from a scheduled band concert.
- 3) Students must have settled all financial obligations for the year. This includes shirts, supplies, fees, etc.

This trip is extracurricular and not part of the student's grade. However, because this trip involves a band competition performance, participation is highly encouraged. In order for our groups to perform their best, we need all of our members.

What is the cost?

The student cost for the trip is \$115. Payment and the attached form are due by **March 24th**. Checks can be made out to the Wester MS Band. Please let Mr. Wood know if you need to make any type of payment arrangements (to fit payday schedule, etc.). Online payment will be available starting the week of February 27th.

Each person will receive the following the day of the trip:

- 1) Transportation to and from New Braunfels via charter bus.
- 2) All day admission into Schlitterbahn Water Park
- 3) Two meal tickets for use at the Schlitterbahn eating facilities
- 4) \$10 in "Splash Cash." This is a wrist band (or card) that will be issued to everyone upon arrival at the park. It can be spent at the park for drinks, locker rental, souvenirs, etc.

Bus Chaperone Information

Parent chaperone cost for the trip will be \$115. At this time we have room for **25 chaperones** so it will be first come, first serve. In order to be put on the list, you must send in the attached form and payment by **March 24th**. Chaperones will receive all of the items listed above. Chaperones will need to be available for a chaperone meeting scheduled during the week of May 8th. This meeting will last about 45 minutes. More chaperone spots may be added as bus space allows.

Please feel free to call or email if you have any questions about our trip. This will be one of the highlights of the year!

Student Name

Parent Signature

_____ Yes, my student will be able to go on the trip. My payment of \$115 is included.

_____ No, my student will not be able to go on the trip.

_____ Yes, I am interested in being a chaperone. My payment of \$115 is enclosed.

- I agree to attend the chaperone meeting during the week of May 9th.
- I understand that I will be chosen on a first-come, first-serve basis.

If you wish to chaperone, please provide the following information.

Parent Name (please print)

Preferred Phone Number

Email Address

All chaperones will be contacted by March 31st by email about their status for the trip.

Please make all checks out to the Wester Band and include your student's name on the memo line. If payment arrangements need to be made, please mention it at the bottom of this page.

RETURN THIS FORM TO YOUR DIRECTOR BY MARCH 24th



Student Trip Permission Form

Student Trip Permission Form to a Water Park

ALL SECTIONS AND INFORMATION MUST BE COMPLETELY AND ACCURATELY FILLED OUT FOR STUDENT APPROVAL.

Student Trip Disclaimer

- A student trip has been scheduled for your child to a water park. Although there will be lifeguards on duty that are employed by the park, MISD feels that you as a parent should determine the appropriateness of the trip based upon your student's swimming ability. Often these parks have some water rides and slides that have height restrictions up to 42" or 48".
- Additionally, there are tide pools and wave pools that may cause difficulty in swimming or in remaining upright on his or her feet.
- The hotel swimming pools are off limits, unless there is a lifeguard supplied by the hotel and on duty. In this case, the school official will set parameters.
- Any student who violates these instructions will be sent home at the parents' expense.

This portion of the form is to be filled out by the school prior to distribution to the parent or guardian.

Campus/Class: Wester Band Destination: Schlitterbahn-New Braunfels

Departure Date/Time: 5/20/17 3:30 AM Return Date/Time: 5/21/17 12:00 AM

Return the Form to: Mr. Wood Date Form is due: 5/12/17

Student Last (print)	First	MI	Student's Date of Birth	Student Grad
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I hereby grant permission for (student name) _____ to participate in the student trip listed above and I have read the Student Trip Disclaimer above. I also understand that by signing below, I am indicating my child's swimming abilities are strong enough to participate in the trip.

I recognize, however, that unanticipated situations and problems can arise on any trip, which situations or problems are not reasonably within the control of the supervising teacher(s), staff or chaperones. We agree to release and hold harmless the Mansfield ISD, their agents, teacher(s), staff or chaperones, from any and all liability, claims, suits, demands, costs, and expense (including attorneys' fees and costs) arising from such activities, including any accident or injury to the student and the costs of medical services.

In the event of an injury requiring medical attention, I hereby grant permission to the supervising teacher(s), staff or chaperones to attend to my son/daughter. If the injury warrants further medical attention, I expect every effort will be made to contact me to receive my specific authorization before action is taken. If efforts to contact me are unsuccessful, I grant permission for necessary medical treatment to be given. In addition, I hereby give my permission to the supervising teacher(s), staff or chaperones to take my child to the physician or to the hospital if an accident or serious illness occurs on the trip and I cannot be located.

In the event that a student must return to Mansfield ISD independently for reasons of health, accident, failure to conform to rules established by the teacher in charge, etc., we agree to accept full responsibility for and to pay for the cost of medical care, transportation and other incidental expenses.

Parent/Guardian Last (print)	Phone #	Cell #	Doctor Name and Phone #
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Parent/Guardian (signature)	Alternate Emergency Contact Name and Phone#
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