

Dear Parent:

In completing the form below you are indicating your preference regarding voluntary participation in the Marching Band. If you choose for your student to participate on a volunteer basis you acknowledge that although grades and credit will not be received, volunteer members will be accountable to the same standards as those students receiving grades. Volunteer participants are required to fully participate must uphold all policies and procedures outlined by the Charlotte-Mecklenburg Schools and the school instrumental program. Failure to do so may result in discontinuation in the program. If you have any questions regarding this letter, please contact me at 980-343-3600 ext. 251 or christopher1.rugila@cms.k12.nc.us.

Sincerely,

Christopher A. Rugila
Marching Band Director

Marching Band Credit Election Form

I, _____, have read the above statement and understand the policy of volunteer participation. I understand that full participation is required and all policies and procedures for Charlotte-Mecklenburg Schools and the school instrumental program must be followed. I also understand that failure to comply with these policies may result in my discontinuation in the program. **(CIRCLE YOUR CHOICE)**

I elect to be registered for marching band as a class and receive credit on my transcript.

I elect to be a volunteer participant in marching band and receive no credit on my transcript.

Student Signature

Date

Parent Signature

Date

Band Director Signature

Date

Principal Signature

Date

C: Permanent Record
Performing Arts Specialist