

# BEHAVIOR COMPLIANCE AGREEMENT

STUDENT NAME \_\_\_\_\_ HOME \_\_\_\_\_  
TELEPHONE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ ZIP CODE \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_

SCHOOL East Haven High School SCHOOL TELEPHONE 203.468-3254

SCHOOL CONTACT PERSON Matthew Laudano POSITION Band Director

PARENTS/GUARDIANS FULL NAMES \_\_\_\_\_

Address \_\_\_\_\_

TELEPHONE NUMBERS  
(home) \_\_\_\_\_ (cell) \_\_\_\_\_

Email address \_\_\_\_\_

## RELEASE

I, a participant in the East Haven High School Co-op Marching Band, sponsored by East Haven/North Branford High School and approved by the East Haven and North Branford Board of Education agree to all the following conditions:

I agree to abide by all rules, regulations, policies, and standards of behavior established and to follow the specific instructions of the Band Director, staff, and chaperones in all instances. I understand that the safety and welfare of the group is of the utmost importance.

I understand that I am expected to participate in all rehearsals and competitions and to complete all related assignments. **I understand that all rules, policies and standards of the school board remain in force.** I further understand that the use of alcohol and illegal drugs are strictly forbidden.

In the event of any infraction of the rules, the Band Director reserves the right of final decision and may, remove the student from the EHHS Co-op Marching Band if deemed necessary.

As a representative of the School Board, I agree to act in a responsible, ethical, and positive manner so as to derive the greatest benefits from the Program and make valuable contributions to the District.

I therefore certify that I have read and understood this behavior compliance agreement and that I agree to abide by all provisions.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

*I certify that I am the parent or legal guardian of the student named above and that I have read the foregoing agreement. I agree to every part of this release and hereby relinquish any claim that I may have against the Program organizers, chaperones, and the School District both on my behalf and in my capacity as legal representative, while my child is a participant in this Program, during both supervised and unsupervised activities.*

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_