

Choir and Percussion Ensemble (Optional)

Child's Name: _____ Year: _____

Parent/Carer: _____

Contact Phone Number: _____

Percussion Ensemble: ☐ Choir: ☐

I give permission for my child to enrol in/apply to join the above group/s and agree to encourage him/her to fulfil the responsibilities of music group membership.

Signature: _____

Date: _____

Music Group Student Agreement

I agree to:

- Attend all practices this year (unless there is a legitimate reason for absence)
- Practise at home
- Concentrate well at practices
- Be respectful, co-operative and self-disciplined
- Attend music festivals and concerts as required.

Child's Signature: _____ Date: _____