



ALLEN HIGH SCHOOL ESCADRILLE

300 RIVERCREST BLVD ► ALLEN, TX 75002 ► WWW.ALLENBAND.COM

ALLEN BAND TRIP STUDENT/PARENT AGREEMENT

Spring Hawaii Trip: March 5-10, 2020 (Group-A) or March 6-11, 2020 (Group-B)

This signed agreement documents that the student going on the trip and the parent understands each point below prior to travel.

INITIAL

_____ **AISD Code of Student Conduct:** All students will abide by the rules and regulations as well as disciplinary actions as presented in the 2019-2020 Code of Student Conduct. All families should have signed that they understand the district policies at the beginning of the year.

_____ **Itinerary:** I have received an e-mail itinerary or have attended the required student meeting on Tuesday, January 14, 2020 and understand the itinerary. I also understand that a final and more detailed itinerary will be issued closer to the trip.

_____ **Flight procedures:** I understand that students will meet at AHS (Group-A) or LFC (Group B) on the departure day and at the proper call time. Students will bus together to DFW for the departure flight. Students are required to pay for appropriate baggage fees via credit or debit card only at the airport as we check-in. Instruments will need to be checked baggage if they do not fit in the overhead compartment or under the seat in front of you. (Tubas and percussion will be provided in Hawaii). **Students will need to be picked up at DFW on the return flight as we will not have transportation from the airport.**

_____ **Room Lists/Flight Lists:** I understand that room selection was done last semester from a "Sign-Up Genius" link. If you were not up-to-date with payments or did not sign-up, you were assigned a room. By initialing this, I understand and know who is in my room. Flights were assigned based on what group you are in, if family is attending, and with your roommates. This is not going to change since our flight manifest is finalized.

_____ **Medication Policies:** I understand the medical policies discussed at the meeting with Nurse Bolin and have the opportunity to receive printed information.

I understand the above information and have had the opportunity to ask questions to the directors, travel agent, administration, and school nurse.

Parent Signature/Date

Student Signature/Date