



TRAVIS HIGH SCHOOL BAND

11111 Harlem Rd.
Richmond, TX 77406
281-634-7086 / 281-634-7111

TRAVEL CONSENT FORM 1B

As a member of the William B. Travis High School Band

Student Name

Grade

Permission to Travel

The above-named student has my consent to travel to and / or from the **All activities beginning August 1, 2010 – June 15, 2011** including all errands and activities related to these events. The mode of transportation may be by airplane, FBISD or commercial bus, a private vehicle driven by school personnel, or a parent chaperone.

I understand that the student will be chaperoned / supervised while in route to or while participating in activities. Students, even though off-campus, are still subject to all school rules and regulations when participating in Travis Band activities. I understand that any student who does not conduct himself/herself properly may be (1) sent home at the parent's expense, (2) prohibited from participating in future activities of this organization, and (3) subjected to other appropriate disciplinary measures.

I agree to, and hereby release Fort Bend Independent School District and its trustees, employees, sponsors and volunteers from all legal responsibility from liability resulting from any activities of this organization, including liability caused by or related to the negligence of any such party.

In case of emergency and with the approval of the sponsor or another FBISD employee, I give my approval and authorization for the first aid treatment and any medical treatment by local physicians and/or hospital including surgical procedures. I agree to accept responsibility for payment of all charges incurred during this medical treatment.

Additional medical information will be on file with the faculty sponsor in case of an emergency. Please make sure the information on the FBISD Travis Band Medical form is current and up to date.

Compliance with the above-described restrictions will be the responsibility of the Student and not FBISD or any of its agents, trustees, volunteers, or employees. The Student understands the above restrictions and agrees to comply with the same. Non-compliance shall be grounds for dismissal from the organization.

My son / daughter has assured me that he / she will conduct himself / herself in such a manner that good credit will be reflected upon the school.

Itineraries will be available for every event and students will need to be picked up promptly following the estimated return time.

Both my child and I understand that all Fort Bend ISD policies are in place during any band event regardless of its location or time.

I have read and agree to the above listed travel sections:

Signature of Parent / Guardian: _____ Date: _____