
Handbook Acknowledgment & Participation Contract

We have read the *2024–2025 Leon High School Band Handbook*, understand, and agree to the information it contains. We know that if we have any questions, we may contact the Band Director by telephone or e-mail. (Typing names and dates in the signature and date fields below is equivalent to an ink signature and date.)

Parent/Guardian Signature

Date (mm/dd/yyyy)

Student Signature

Date (mm/dd/yyyy)

Student Information

Name: _____

Instrument(s): _____

Address: _____

City: _____ State: FL Zip Code: _____

Home Phone: () _____ Cell Phone: () _____

Parent/Guardian Information

Parent/Guardian 1 Name: _____

Relationship to Student: _____

Address: _____

City: _____ State: FL Zip Code: _____

Work Phone: () _____ Cell Phone: () _____

Primary Email Address: _____

Alternate Email Address(es): _____

Parent/Guardian 2 Name: _____

Relationship to Student: _____

Address: _____

City: _____ State: FL Zip Code: _____

Work Phone: () _____ Cell Phone: () _____

Primary Email Address: _____

Alternate Email Address(es): _____