



Panther Pride Marching Band 2019 Commitment Form

The Pasquotank County High School Marching Panthers are looking forward to an exciting competitive marching season this coming fall with our show entitled **"Through the Looking Glass"**. In order to properly plan out the show, we must know the number of marching musicians in each section. Please take a few minutes to review the enclosed calendar, fee schedule, and fill out the information below. In addition to a time commitment, there is a financial commitment. These costs help cover camp fees, show design fees, instructional fees, and other costs associated with the marching band totaling \$18,200. A complete breakdown of the fees can be provided upon request. **The past few years the Band Boosters with the support of many others have raised the funds to give a \$120 "Fundraising Discount" per student totaling up to \$6,000.** All fundraising events support ALL the PCHS Bands, we would love for you to come and support the various fundraising efforts. **We rely on parent support through volunteer hours and direct donations throughout the year to maintain this student fee discount.**

Student Fair Share Cost

\$364 Fair Share/Student (based on 50 students)
- \$120 Booster Fundraising Discount
\$244 Fair Share/Student

- **Returning** Marching Band Members (*not counting Polo, Shoes, and Gloves*) - **Total Fees = \$261.**
(\$261 includes: \$244 Fair Share, \$15 Competition Show T-shirt, and \$2 Gloves)
- **New** Marching Band Members - **Total Fees = \$317.**
(\$317 includes: \$244 Fair Share, \$15 - 1 Competition Show T-shirt, \$28 - 1 Polo, \$28 - 1 pair Dinkles, and \$2 - 1 pair of gloves)

_____ **Yes! I will be a member of the Marching Panthers for the 2019 season.**

*Required Information

*Student Name: _____

*Student Phone #: _____

*Student Email Address: _____

*Primary Instrument: _____

Secondary Instrument: _____

* Parent/Guardian Name: _____

*Parent/Guardian Cell Phone #: _____ *Home Phone #: _____

*Parent/Guardian Email Address: _____

*Address: _____

Secondary Parent/Guardian Name: _____

Secondary Parent/Guardian Cell Phone #: _____ Home Phone #: _____

Secondary Parent/Guardian Email Address: _____

Parents/Guardians and Students: We have read the calendar and understand the commitment for rehearsals, performances, and fees. We also understand that if we choose not to participate at any point during the season that any fees paid in will **NOT** be refunded.

*Parent/Guardian Signature: _____ Date: _____

*Student Signature: _____ Date: _____