Congratulations!

You have been selected to participate in Celebrate the Arts on March 22-23 at South Columbus High School. This is a tremendous honor, and we are delighted that you will be taking part in the state’s largest student arts festival.

By accepting this invitation, you are committing to the following:

1. being present both days
2. providing own transportation on March 23to South Columbus High School
3. being on time at all required classes/rehearsals
4. preparing/rehearsing/learning all materials THOROUGHLY before March 22nd
5. abiding by all school rules and rules of the campus
6. not leaving the designated area or the campus for any reason without permission from the instructor
7. treating the clinician, adults and fellow students with respect and honor
8. working diligently all days towards performance/exhibition
9. Leaving all digital devices at home- any lost or damaged digital devices are the sole responsibility of the student, and will not be locked or secured by the school
10. ANY STUDENT MISSING MORE THAN 30 MINUTES WITHOUT APPROVAL (for any reason) WILL BE DISMISSED FROM THE CLINIC.

In return, you will be treated with respect and will have a positive experience.

The schedule for March 23rd is as follows:

|  |  |  |
| --- | --- | --- |
| 4:00-8:30 | K-12 Student Art Exhibit/Piano Performance |  |
| 5:30 | General Music Performance |  |
| 5:30-6:00 | Visual Arts Recognition Ceremony |  |
| 6:00-6:30 | Middle School Chorus Performance |  |
| 6:30-7:00 | High School Chorus Performance |  |
| 7:00-7:20 | Dance Performance |  |
| 7:20-7:40 | Theatre Performance |  |
| 7:55-9:00 | Middle School/High School Band Performance |  |

Please encourage your family to attend all events.

By signing below, you agree to the above commitments

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (student)

By cosigning, you agree to assist your child in fulfilling these commitments, and grant permission for your child to be transported March 23rd during the school day. You also understand that missing any rehearsal time may result in your child being dismissed from the clinic.

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (parent/guardian)  
  
Please sign one copy, and keep one copy for reference.