

**Rutherford County Schools**

**Travel Permission and Emergency Medical Release Form 2026-2027**

Name of Student: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mother/Guardian 1:

Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work: \_\_\_\_\_ Work Number: \_\_\_\_\_

Father/Guardian 2:

Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work: \_\_\_\_\_ Work Number: \_\_\_\_\_

If neither parent can be reached call : \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Student's Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Are there any medical problems, allergies, or other information the teacher should know about in order to make the trip safer for your child? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

If yes, give details: \_\_\_\_\_

Will your child need prescription or over-the-counter medications while on this field trip: **Yes\*** \_\_\_\_\_ **No** \_\_\_\_\_

\*If **YES**, you **must** also complete the attached **Overnight Field Trip Medication Procedure and Authorization Form** and obtain a healthcare provider signature for any prescription medications.

Date of Last Tetanus Shot: \_\_\_\_\_

Health Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

\_\_\_\_\_ has my permission to travel with

(Name of Student)

The Blackman High School Band during the 2026-2027 school year. In case of need, I grant permission for my child to be treated by a health care professional in my absence.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Before me, a Notary Public, in and for Rutherford County, Tennessee, personally appeared

\_\_\_\_\_, with whom I am acquainted and who acknowledged the completion of this instrument.

Witness my hand and official seal of office on this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
COMMISSION EXPIRES

\_\_\_\_\_  
NOTARY PUBLIC

# Blackman HS Band Permission Form 2026-2027

Student Name (please print): \_\_\_\_\_ Instrument: \_\_\_\_\_

**All band students will participate in Concert Band AND Football Band. Choose your pathway for Football Band.**

\_\_\_\_\_ Blaze Football Band - **HALF-TIME BAND**

\*Perform the Half-time show at games & in stands

\* Attend band camp

\* Attend Thursday full band rehearsals

\_\_\_\_\_ Blaze Football Band - **STANDS BAND**

\*Perform in stands at games

ALL BAND MEMBERS DO THESE 4 ADDITIONAL ACTIVITIES:

\* Participate in the uniform fitting

\* Participate in school pep rallies

\* Participate in the May Mini-Camp

\* Participate in parades (Homecoming & Christmas)

## **Financial Acknowledgement and Agreement**

We hereby acknowledge that we have read and understand the financial responsibilities outlined in 2026-2027 FINANCIAL MEMBERSHIP AGREEMENT, which can also be found in the Band Handbook, and have selected an option for payment.

\_\_\_\_\_  
Band Member Initials

\_\_\_\_\_  
Parent/Guardian Initials

## **Membership Agreement and Internet Release**

I, the undersigned student, accept membership in the Blackman High School Band and understand I am responsible for all policies set forth in the band handbook. I agree to carry out my responsibilities to the very best of my ability.

\_\_\_\_\_  
Band Member Initials

I, the undersigned parent/guardian, have read and understand the policies set forth in the band handbook. I grant full permission for my child to be an active member of the Blackman High School Band. In addition, my child has full permission to attend all band functions. I also grant the Blackman High School Band to use my child's image and name on all print and internet publications associated with the band.

\_\_\_\_\_  
Parent/Guardian Initials

## **Blaze Football Band Performance and Travel Procedures**

My child may participate in the Blaze Band performances during the 2026-2027 school year. I agree to follow all guidelines set forth by the band directors. I agree to be responsible for transportation for my child to IN-COUNTY football games and I give permission for my child to travel by bus to OUT-OF-COUNTY football games.

\_\_\_\_\_  
Parent/Guardian Initials

## **Uniform Acknowledgement and Agreement**

We hereby acknowledge that we have read and understand the Blackman High School Band Marching Uniform and Concert Uniform information provided in the Band Handbook. We understand that proper care for and use of the assigned uniform is our responsibility and that any loss and/or damage for any reason during my use and retention of the uniform and/or accessories is our sole financial responsibility and liability. It is further understood that all uniform articles are issued and recorded by identification number. The same numbered uniform articles that are issued must be returned in good condition or we must pay a cleaning and replacement fee.

\_\_\_\_\_  
Band Member Initials

\_\_\_\_\_  
Parent/Guardian Initials