

# Fine Arts Department

Stoughton Public Schools

## Trip Commitment Form

SHS Band & Choir

Washington D.C. Music Trip

April 12<sup>th</sup> – 15<sup>th</sup>, 2018

Dear Student & Parent/Guardian,

In order to participate in the SHS Washington D.C. Music Trip, please read and return the attached **Trip Commitment Form** to be signed by both student and parent along with an initial deposit of *at least* \$170.00, the SHS Medical Form and the signed HIPAA form. Please return all forms and the 1<sup>st</sup> deposit by Tuesday, October 31<sup>st</sup>, 2017.

### Trip Cost

The total per-person cost of the trip is projected to be \$599 minimum... but **the actual cost of the trip for all students will be further reduced depending on student fundraising in the 2017 and 2018 Town-Wide Raffles**. As a result of fundraising from the 2017 Town-Wide Raffle last spring, **all students are already receiving a \$30 discount on their first trip payment**, which has been reduced from a \$200 minimum to a \$170 minimum.

Students choosing the optional refund trip insurance and/or Saturday evening National Symphony Orchestra (NSO) performance will have a higher total cost.

### Payment Schedule

**Payment #1 – Due on Tuesday, October 31st:** \$170.00 (or more depending on additional options)

**Payment #2 – Due on Friday, January 5th:** \$200.00

**Payment #3 – Due on Friday, February 16<sup>th</sup>** (amount to be determined after the 2018 Town-Wide Raffle fundraiser)

### Acceptable Forms of Payment

Payments can be made by bank check or money order only. **No personal checks will be accepted.** No cash will be accepted.

**Payments should be made to: POPS Inc.** (Parents of Performing Students)

### Refund Policy – Trip Insurance

All payments are non-refundable. Once our down payment is submitted, there will be no refunds for any reasons. The tour company, Suburban Tours, offers optional Travel Protection for a modest fee.

The Basic Trip Cancellation protection adds \$17.00 to the total cost. The “Cancel For Any Reason” protection adds \$25.00 to the total cost of the trip. More information can be found on the Fine Arts Web site. If choosing the Travel Protection Waiver, the additional fee will be due with the initial down payment.

### Students in Good Standing

Students must be in **Good Standing** to attend the trip. Students who lose their **Good Standing** status before the trip may be removed at the discretion of the SHS Administration. Please refer to the SHS Student Handbook for complete details. Stoughton High students are considered to be in good standing unless one of the following applies: academically ineligible (earned less than 22 credits in the previous marking period, or less than 22 credits for the previous year) 5 unexcused tardies to school per term; 2 parking violations per term; owes any student debt for uniforms, books, materials, or damage to school property, etc.

Students not in good standing are not eligible to attend or participate in the following school activities: all school dances and proms, Powder Puff game and cheerleading, Mr. SHS and Improv Night, Senior Trip, and **any other school activity, including field trips, deemed applicable by the administration.**

### Parent Informational Meeting

A Student/Parent Informational Meeting will be scheduled for late January/early February. This meeting will give parents the opportunity to ask questions concerning the trip. The staff will provide a complete overview of the trip itinerary, medical considerations, and outline student and parent expectations for the trip. The student rules for the trip will be reviewed at this time. This meeting is mandatory for both student and parent/guardian.

### Medical Form

The SHS Medical Form is needed to travel with the High School Music Department. Please return the completed form with your commitment form and down payment to Mr. Nickelson-Mann or Mr. Mange.

# 2018 WASHINGTON D.C. MUSIC TRIP COMMITMENT FORM

(Please return the commitment form, medical form and your deposit by Tuesday, October 31st)

I give permission for:

(Name) \_\_\_\_\_ (Group) \_\_\_\_\_ Grade \_\_\_\_\_

to attend the 2018 Washington D.C. SHS Music Trip on April 12<sup>th</sup> through 15<sup>th</sup>, 2018. I understand that this form is binding and any monies received by POPS are non-refundable. I also understand that trip insurance has been offered at additional cost to cover unforeseen circumstances in the case of a student not being able to go on the trip.

## I. Please check and initial each item.

- Initials** \_\_\_\_\_ My child will be participating in the 2018 SHS Music Trip to Washington D.C. April 12<sup>th</sup>-15<sup>th</sup>.
- Initials** \_\_\_\_\_ I understand the financial obligations of the trip including the payment schedule.
- Initials** \_\_\_\_\_ I understand that my child needs to maintain his or her **Good Standing** status in accordance with the SHS Student Handbook.
- Initials** \_\_\_\_\_ I understand that a violation of the SHS Handbook and Music Department Trip rules will result in disciplinary action.
- Initials** \_\_\_\_\_ I understand that Travel Insurance has been offered for my child.
- Initials** \_\_\_\_\_ I understand that a SHS Medical form needs to be submitted to the department.
- Initials** \_\_\_\_\_ I understand that my child and one parent/guardian are expected to attend the Trip Meeting to be scheduled in late January or early February.

## II. Trip Insurance

Please check and initial the appropriate item.

### Accept

- Initials** \_\_\_\_\_ Yes, I want Basic Cancellation protection for an additional \$17.00.
- Initials** \_\_\_\_\_ Yes, I want "Cancel for Any Reason" protection for an additional \$25.00.

### Decline

- Initials** \_\_\_\_\_ No, I do not want Travel Protection cancellation insurance for my child.

## III. National Symphony Orchestra Performance

Please check and initial the appropriate item.

- Initials** \_\_\_\_\_ Yes, my child **will** attend the NSO performance on Saturday evening (ticket costs an additional \$28).
- Initials** \_\_\_\_\_ No, my child **will not** attend the NSO performance on Saturday evening.

## IV. Student/Parent Guardian Information

Parent phone numbers where you can be reached: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Parent e-mail address: \_\_\_\_\_

## V. Parent Permission – Student Acknowledgement

By signing this commitment form, I understand and agree to the requirements of the trip as stated above.

Parent/Guardian Signature: \_\_\_\_\_ Name \_\_\_\_\_ Date: \_\_\_\_\_  
(Please print)

Student Signature: \_\_\_\_\_ Name \_\_\_\_\_ Date: \_\_\_\_\_  
(Please print)

## VI. Payment Summary

1st Trip Payment enclosed:  \$170

Optional Insurance Payment enclosed:  \$17  \$25

Optional NSO Ticket Payment enclosed:  \$28

*No cash or personal checks  
will be accepted! Only money  
orders or bank checks made  
out to POPS.*

**Total Payment Enclosed:** \$ \_\_\_\_\_ .00