

Sherando High School Color Guard Commitment Form

Due May 15th, 2024

I, _____, have read through the expectations and understand the time commitment, dedication, physicality, and teamwork this activity entails. I am aware of the consequences of certain actions and will abide by them if I were to exhibit any of the actions or behaviors. I understand that consistent tardiness, bullying or hazing of any sort, or lack of compliance to school policies will lead to removal from the group.

Member Phone Number _____

Signature _____

Date _____

I, the parent of, _____, have read through the member expectations and the parent expectations. I understand the time commitment, dedication, and teamwork this activity entails for my child. I will abide by the expenses that go along with this activity. I am aware that if my child chooses to leave the group or removed from the group, that all fees are nonrefundable.

Parent's Name _____

Email _____

Signature _____

Date _____