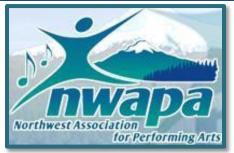
Permission to Participate A signed copy of this form must be on hand at every show in which

the student performs.



Name of Student:	
Student's School of record:	
School with which student is performing:	
We the undersigned agree that as (School of record listed a marching band activity(The student listed above) is perm with units representing (school with which the student is p NWAPA Fall Season.	nitted to participate and perform
Student must be in 9th grade and meet any applicable acadextra curricular activity participation at the student's School	- , ,
This form is valid only for the NWAPA fall season that corre	esponds to the dates signed below:
Signature – Music Director of Student's School of Record	Date
Signature – Music Director of Performing High School	 Date
Signature – Student's Parent or Legal Guardian	 Date