

Welcome to Lawrence North Performing Arts

2017-18 School Year

Dear Parents and Guardians of Performing Arts Students,

You and your students are an integral part of the outstanding high school performing arts program here at Lawrence North! Parent involvement is key to the success of the program and there will be many opportunities through the year for you to be actively involved in your student's musical experience at Lawrence North.

All communications from the department are sent via email, so it is imperative for us to have accurate contact information on record for all parents and guardians. It is also a requirement that we have student medical information on hand when the groups travel. **Please complete both sides of the attached form** and return by Thursday, August 10. Your student will receive a grade for the return of this information.

Maintaining a State level competitive Performing Arts program is very expensive, and outside funding is limited. We make every effort to keep our performance and participation fees as low as possible, however, each band, orchestra and choir does have associated fees. We offer scholarships and many fundraisers throughout the school year to offset these fees. Our goal is to make the performing arts available to everyone, regardless of means. Newsletters and fundraising information will be communicated throughout the year, and monthly statements of your student's account will be sent.

Full details regarding the specifics and expectations of each program can be found in the Band, Choir, and Orchestra handbooks which are linked in your student's Canvas account, and will be emailed to all parents soon.

Please contact us with your questions. We look forward to working with your students, and you!

Band:

Tom Wallis	Band Director:	Phone: 317 964-7955	Email: thomaswallis@msdlt.k12.in.us
Glen Hauger	Band Director:	Phone: 317 964-7954	Email: glenhauger@msdlt.k12.in.us
Neil Titus	Percussion Director:	Phone: 317 964-7958	Email: neilitus@msdlt.k12.in.us
Julie Cole	Color Guard Director:	Phone: 317-964-7569	Email: lawrencetownshipcg@yahoo.com

Choir:

Jenny Gafron	Choral Director:	Phone: 317-964-7956	Email: jennifergafron@msdlt.k12.in.us
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Orchestra:

José Valencia	Orchestra Director:	Phone: 964-7917	Email: josevalencia@msdlt.k12.in.us
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Performing Arts Administrative Assistant:

Alison Goller		Phone: 317 964-7951	Email: alisongoller@msdlt.k12.in.us
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LNHS PERFORMING ARTS DEPARTMENT 2017-2018 CALENDAR

DATE	EVENT	TIME	LOCATION
Wednesday, September 20, 2017	Band Concert	7:00 PM	Auditorium
Tuesday, September 26, 2017	Choir/Dance Concert	7:00 PM	Auditorium
Tuesday, October 03, 2017	MPLT with FCV/BMS Bands	6:00PM	Auditorium
Thursday, October 05, 2017	Orchestra Concert	7:00 PM	Auditorium
Saturday, October 21, 2017	Choir Side by Side with FCVMS	all day	cafe/auditorium
Friday, November 10, 2017	Fall Musical - Footloose	7:00 PM	Auditorium
Saturday, November 11, 2017	Fall Musical - Footloose	7:00 PM	Auditorium
Monday, November 13, 2017	Veteran's Day Program	morning	Auditorium
Wednesday, November 15, 2017	Percussion Concert	7:00 PM	Little Theater
Thursday, November 16, 2017	Dance Recital	7:00 PM	Auditorium
Wednesday, November 29, 2017	Orchestra Holiday Concert	7:00 PM	Auditorium
Thursday, November 30, 2017	Jazz Dance Concert	7:00 PM	Little Theater
Friday, December 01, 2017	Choir "Snowfall Sweets"	7:00 PM	Little Theater
Tuesday, December 05, 2017	Musical Theatre Cabaret	7:00 PM	Little Theatre
Thursday, December 07, 2017	Band Holiday Concert	7:00 PM	Auditorium
Wednesday, December 13, 2017	Choir Holiday Concert	7:00 PM	Auditorium
<i>Saturday, January 27, 2018</i>	<i>ISSMA District Wind/Percussion/String</i>	<i>all day</i>	<i>TBD</i>
Wednesday, January 31, 2018	Band Pops Concert	7:00 PM	Auditorium
<i>Saturday, February 03, 2018</i>	<i>ISSMA District Vocal/Piano</i>	<i>all day</i>	<i>TBD</i>
Wednesday, February 07, 2018	Orchestra Concert	7:00 PM	Auditorium
Thursday, February 15, 2018	Show Choir Competition Preview Concert	7:00 PM	Auditorium
<i>Saturday, February 17, 2018</i>	<i>ISSMA State Vocal/Piano</i>	<i>all day</i>	<i>TBD</i>
<i>Saturday, February 24, 2018</i>	<i>ISSMA State Wind/Percussion/String</i>	<i>all day</i>	<i>TBD</i>
Friday, March 02, 2017	Spring Play - Antigone	7:00 PM	Little Theater
Saturday, March 03, 2018	Spring Play - Antigone	7:00 PM	Little Theater
Thursday, April 05, 2018	Lawrence North Vocal Music Festival	all day	auditorium
Friday, April 06, 2018	Spring Play - Star Spangled Girl	7:00 PM	Little Theater
Saturday, April 07, 2018	Spring Play - Star Spangled Girl	7:00 PM	Little Theater
Thursday, April 12, 2018	Band Contest Preview Concert	7:00 PM	auditorium
Wednesday, April 18, 2018	Orchestra Contest Preview Concert	6:00 PM	auditorium
Thursday, April 19, 2018	Choir Contest Preview Concert	6:00 PM	auditorium
<i>Friday, April 20, 2018 or</i>	<i>ISSMA Organization Contest</i>	<i>TBD</i>	<i>TBD</i>
<i>Saturday, April 21, 2018</i>	<i>ISSMA Organization Contest</i>	<i>TBD</i>	<i>TBD</i>
<i>Saturday, April 28, 2018</i>	<i>ISSMA State Qualification</i>	<i>TBD</i>	<i>TBD</i>
Friday, May 04, 2018	Dance Recital	7:00 PM	Auditorium
<i>Saturday, May 05, 2018</i>	<i>ISSMA State Concert Finals</i>	<i>TBD</i>	<i>TBD</i>
Tuesday, May 08, 2018	Percussion Concert	7:00 PM	auditorium
Thursday, May 10, 2018	Jazz Concert	7:00 PM	Auditorium
Friday, May 18, 2018	Choir Concert	7:00 PM	auditorium
Monday, May 21, 2018	Band/Orchestra Awards	6:00 PM	cafeteria/Little Theater
Wednesday, June 06, 2018	Commencement		Indiana Farmer's
Friday, June 22, 2018	Rummage sale set up	All Day	Fieldhouse
Saturday, June 23, 2018	Rummage sale	All Day	Fieldhouse

LNHS PERFORMING ARTS STUDENT CONTACT INFORMATION
(Required Form)

2017-2018 School Year

Please check all that apply to your student:	
BAND	_____
CHOIR	_____
ORCHESTRA	_____

STUDENT INFORMATION:

Name: (Last) _____ (First) _____ Graduation Year: _____

Home Phone: (Area) _____/_____

Cell Phone: (Area) _____/_____

Student Email Address: _____

Street Address: _____

City: _____ Zip: _____

Concert Instrument: _____ (N/A for choir)

Marching/Pep Inst.: _____ (N/A for choir and orchestra)

ALL student account statements will be sent via EMAIL.
At Least ONE email address is required for student account billing.

PARENT 1 INFORMATION:

Name: (First) _____ (Last) _____

Work Phone: (Area) _____/_____

Cell Phone: (Area) _____/_____

Email Address: _____

Please send my statements to this email address.

PARENT 2 INFORMATION

Name: (First) _____ (Last) _____

Work Phone: (Area) _____/_____

Cell Phone: (Area) _____/_____

Email Address: _____

Please send my statements to this email address.

OVER – Both Sides Must Be Completed

LNHS PERFORMING ARTS STUDENT MEDICAL INFORMATION (Required Form)

2017-2018 School Year

STUDENT: Name: (Last) _____ (First) _____ Grad. Year: _____ Birth Date: _____

PARENT(S) NAME: Parent 1: _____ Parent 2: _____

Primary Phone #: _____/_____/_____ Secondary Phone#: _____/_____/_____

EMERGENCY CONTACT: (other than parents) _____ Phone: _____/_____/_____

DOCTOR'S NAME: _____ Phone: _____/_____/_____

Hospital Preference: _____ Date of Last Tetanus Shot: _____

DENTIST'S NAME: _____ Phone: _____/_____/_____

Does the student have any of the following health conditions?

___ **Allergies:** (Food/Drug/Bees/Other) _____ What happens: _____

Is emergency medication used? **Yes / No** Medication: _____

___ **Asthma:** Is an inhaler used? **Yes / No** Medication: _____

Triggered by: _____

___ **Diabetes:** Takes Insulin? **Yes / No** Blood sugar checked at school? **Yes / No**

___ **Bone/Joint problems:** Describe: _____ Any physical restrictions? _____

___ **Seizures:** describe: _____

Date of last seizure: _____ Medication: _____

___ **Heart Condition:** Describe: _____

Any physical restrictions? _____ Medication: _____

___ **Other:** Describe: _____

Any physical restrictions? _____ Medication: _____

AUTHORIZATION FOR PARTICIPATORY CONSENT & MEDICAL RELEASE

I have received the LNHS band handbook and understand all information associated with being a member of the LNHS Band program. Furthermore, I have read and understood the LNHS Band Code of Conduct and will adhere to the rules of Lawrence North High School at all times both on and off campus when participating in a band related activity.

We (I) hereby authorize any school staff member or adult chaperone traveling with the Lawrence North High School Band, Indianapolis, Indiana to obtain emergency medical treatment/hospitalization for our/my son/daughter while he/she is practicing or traveling with the Lawrence North High School Band. I/We also give permission for any school staff member or adult chaperone to give my son/daughter non-prescription drugs such as antacids, cough drops, ibuprofen, acetaminophen, etc. upon reasonable request by student.

Student Signature: _____

Date: _____

Parent/Legal Guardian Signature: _____

Date: _____