



Just
Brass.



Registration
Form



Welcome to Just Brass.

We are excited that you want to be part of Just Brass. We are glad that you are taking this opportunity to learn a musical instrument and develop your musical skills with us.

Just Brass desires for young people to experience the rich benefits of music, through individual and group learning, irrespective of family, school or community circumstances.

You will be placed in a band that is appropriate to the level art of the beginner band that will only include young people commencing on their instrument for the first time.

Just Brass essentials

We have weekly band practices during school terms at The Salvation Army Ringwood, Cnr. Wantirna and City Rd, Ringwood. Practices are held on Fridays from 4:15 pm to 5:15 pm. Afternoon tea will be provided prior to every rehearsal at 3.50pm.

Your participation is subject to completion of the attached registration form, as well as the return of personal and medical registration form for The Salvation Army Ringwood.

Just Brass is offered to students enrolled at primary schools that partner with The Salvation Army. Students who enrol in the program are provided with an instrument, music books, a music stand, and free tuition from a tutor at their school.

For more information

Contact one of the following:

Trudy Gittins
Just Brass Coordinator
M: 0450543651
E: trudyalg@gmail.com

Emma George
Children & Youth Coordinator
M: 0419613237
E: emma.george@salvationarmy.org.au

Just Brass. values

PARTICIPATION, POTENTIAL, PERSISTENCE AND PARTNERSHIPS

Participant Registration



Student Details

Name: _____

Address: _____

Suburb: _____ Postcode: _____

Email address: _____

(this will be used to send you reminders about concerts, newsletters, and other important information).

Home Phone: _____ Mobile phone: _____

School: _____

Your registration in Just Brass at The Salvation Army Ringwood requires completion of a Personal & Medical Information Form.

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Please find attached the completed Permission Form, including Medical details.

Instrument Choice

Please complete on attach Permission form.

Participant's Agreement

As a participant in Just Brass, I agree to:

1. Attend band practice each week on Fridays from 4.15pm-5.15pm,
2. Commit to 15 minutes of practice 4 days a week,
3. Do my best to look after all equipment entrusted to me, and
4. Attend and participate in the end of term concert.

I acknowledge that my ongoing participation in Just Brass is subject to my full participation and my involvement may be suspended or withdrawn by the Just Brass Director if I choose not to uphold my commitment.

Student's Signature

Student's Name (print)

Date

Parent or Caregiver's Signature

Parent or Caregiver's Name (print)

Date



Travel Registration



Just Brass provides limited transport from partnering primary schools to The Salvation Army Ringwood on Friday straight after School. Travel is subject to availability and all students must be registered to travel. Parent's need to collect their child/children from Ringwood Salvos after Friday rehearsal at 5.15pm.

I hereby grant permission for _____ (child's name) to travel by transport arranged by The Salvation Army to 'Just Brass' at The Salvation Army Ringwood, Cnr Wantirna & City Rd, Ringwood, each Friday afternoon.

I acknowledge that my child/children will be collected each Friday afternoon at approximately 3:30pm. Parent's of Marlborough Primary school Student are to collect their child/children from The Salvation Army Ringwood at 5.15pm.

I understand that certain inherent risks and dangers exist in the activities in which my child will be participating. I acknowledge that while the organisation and its leaders will make every reasonable effort to minimise exposure to known risks, all hazards and dangers associated with these activities cannot be foreseen or may be beyond the control of the organisation, its leaders and staff. In the event of any emergency where my nominated contact people are unavailable:

1. I authorise the leaders to obtain medical advice and/or assistance that they deem necessary.
2. I further authorise qualified practitioners to administer anaesthetic if required.
3. I accept all operation, blood transfusion and/or anaesthetic risks involved in the event that such procedures are deemed necessary.
4. I accept the responsibility for payment and agree to pay medical, transport and any other related expenses.
5. I confirm that the information contained in this document is true and correct.
6. I agree to inform the leader of any change to these details.

Signature of parent or caregiver: _____

Name of parent or caregiver: _____

Date: _____