



## 2020 CHS Band Trip Intent Form

Williamsburg, VA – April 2-4, 2020



Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_

School (circle): **CHS** **WMS** **LMS**

### Anticipated performing ensembles (check all that apply to you):

\_\_\_\_\_ I am in Concert or Symphonic Band

\_\_\_\_\_ I plan to participate in indoor color guard

\_\_\_\_\_ I plan to participate in indoor drumline

\_\_\_\_\_ I am in marching band (*not the other ensembles*) but I would like to participate in the concert performances for the trip

### Intent to participate in CHS Band Trip

It is my intent to participate in the CHS Band Trip April 2-4, 2020. I am hereby making the financial commitment to this trip understanding that if I change my mind later, my deposit and additional payments may not be refundable depending on the deposits that have been placed on transportation, hotel and other trip activities. I am committing to pay the total cost of my trip according to the following payment schedule:

- November 1 - Trip Intent Form Due
- November 29 (Deposit) - \$100
- December 27 - \$100
- January 31 - \$100
- February 28 - \$100

**(TOTAL STUDENT TRIP COST - \$400)**

Total trip cost per student is based on quad occupancy in hotel and a minimum of 65 trip participants. Variations in rooming assignments and number of participants may impact the student trip cost. If the actual cost is greater than \$400, students *may* be asked to pay the additional cost. If the cost is less than \$400, students will receive one of the following: A) credit to their trip account, B) money towards meals during the trip, C) a partial refund of money paid.

*(Please make checks payable to: **CHS Band Boosters**)*

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Phone Number \_\_\_\_\_