Dear Parents/Guardians,

We are beginning rehearsals for our Year 6 Senior Concert Band at Campbell Primary School. This ensemble is for all students learning the Flute, Clarinet, Trumpet, Lower Brass and Percussion through the Instrumental Music School Services (IMMS) program.

Rehearsals will be held on **Tuesday afternoons** in the Music Room straight after school. Students are encouraged to bring a quick snack to have before the rehearsal begins, and need to be **collected from the Music Room at 4.00pm** or can go home in the usual manner if parents do not collect. Please note that it is an expectation that all of our instrumental studies players (excluding guitars) will be part of the band.

We will expect our band members to demonstrate the Campbell Virtues of Respect, Responsibility and Friendliness in their ensemble playing. We also expect Band members to attend all rehearsals unless absent from school. The group will be directed by Mrs West and we welcome any parents who would like to contribute their musical skills in any way, the more the better!

Students need to:
- Bring their instrument and spare reeds, valve oil/slide cream, etc, (as appropriate to their instruments)
- Percussionists need to bring their stick bag as usual.
- Bring music. (Accent on Achievement) Percussionists do not need music—we will provide it for them.
- Bring a water bottle
- Bring a pencil
- Have a positive attitude!

We will be commencing rehearsals on Tuesday **10 February 2015** – **Week 2** to begin preparations for the ANZAC Assembly. I am very much looking forward to conducting this ensemble and can’t wait to see what our students achieve in 2015!

Kind Regards

Marsha Almeida
Performing Arts: Music

3 February 2015

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My child………………………………………LA………..is allowed to participate in the Campbell Primary Senior Band. I understand that that my child needs to be at school from 2.50 pm – 4.00 pm on a Tuesday.

I have read and understood the attached information regarding the Concert Band and give my consent for my child to attend.

Where it is not practical to communicate with me, I authorise the teacher/s in charge to consent to my child receiving such medical treatment as may be considered necessary. I am aware the Department of Education insurance does not cover personal accidents through misadventure nor loss or damage of personal belongings.

Signed………………………………………………Date……………………

(Parent/Guardian)

Contact Numbers: Mobile…………………………………… Home……………………………………