



CHORUS AND ORCHESTRA

PERFORMANCE TRIP

WALT DISNEY World®

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**Northwestern Middle School
Chorus and Orchestra
2019 Disney Performance Trip
WHAT TO BRING**

1. Please limit yourself to one suitcase and one carry-on bag. You should be able to carry everything you bring in ONE trip. **IF YOU BRING IT, YOU CARRY IT!**
2. COMFORTABLE OUTFITS AND SHOES for the daytime. You will be walking and need to be comfortable. Remember that the Northwestern dress code will be enforced at all times. No spaghetti straps, short shorts, tight clothing, athletic shorts, halter tops, backless shirts, tank tops, or anything else inappropriate. You may wear SLEEVELESS shirts, but there is a fine line between sleeveless and tank. If you couldn't wear it to school, **DON'T BRING IT.** You are allowed to wear a hat in the park.
3. **YOUR UNIFORM** for the performance will be your Northwestern Orchestra or Chorus polo and **BLACK PANTS.** No sweat pants or black jeans. You must also wear black shoes and black socks.
4. SPENDING MONEY. Your breakfast and one meal voucher will be provided but you will want to have money for snacks and souvenirs. Due to the expense of food in the parks I recommend at least \$50 cash. All students must contribute \$10 cash for the bus drivers' tip.
5. WATER BOTTLES to carry into the park. You may want to carry a small bag or fanny pack. **SNACKS** and **DRINKS** for the trip. All drinks carried on the bus should have a top that will seal such as a sports bottle. Absolutely **NO** dairy or peanuts on the bus.
6. **UMBRELLA** and a **LIGHT JACKET** or sweatshirt.
7. **PILLOW** and **BLANKET** for the bus. Remember we are sleeping on the bus on the way home.
8. **SUNSCREEN!!!** Stay hydrated. You won't have any fun if you get sick or sunburned.
9. **TOILETRIES** and **PERSONAL ITEMS**
10. **CELL PHONE** with backup battery or charging cord
11. **YOUR INSTRUMENT** (Orchestra only). This includes a bow, rosin, rock stop, extra strings, stool for basses. It is your responsibility to make sure your cello or bass is packed and ready to load. It is also your responsibility to make sure your instrument and equipment are moved safely to and from the performance and to and from the bus. Violins and violas **DO NOT** go under the bus. They must go inside the bus.



Name: _____

**Northwestern Middle School
Chorus and Orchestra
Code of Conduct
2019 Disney Performance Trip**

To preserve the dignity and respect that have always been a part of the Northwestern Middle School Chorus and Orchestra programs, I do hereby pledge to uphold the following policies while participating in the trip to Orlando.

I give my word of honor that I will observe the following policies:

1. I will not condone, partake, handle, or distribute any form of alcoholic beverages, any form of drugs (either illegal OR over the counter) or any form of tobacco.
2. I understand that talking about partaking in any undesirable conduct will be considered as an intention to do the same.
3. I will not enter the hotel room of students of the opposite gender at any time.
4. I understand that I am a guest in the hotel as well as on all public transportation and property. The property thereof does not belong to me. I have no right to damage or remove it. I will not leave trash on the bus or damage the bus in any way. Upon checkout from the hotel, all rooms will be inspected by the chaperones. Any damages found or items missing will be paid for by the students in the room.
5. I understand that during travel, all stops for meals will be made as a group, and that I am not allowed to go anywhere without a chaperone.
6. I understand that the directors and tour company host spent many hours making arrangements so that we will have the privilege of taking this trip. Although I may not be completely satisfied with all of these arrangements, I do realize that it is extremely rude to voice complaints about the hard work and efforts of others. I will conduct myself with an air of gratitude.
7. I understand that I have an obligation to inform the chaperones and/or directors of any undesirable behavior on the part of another trip member.
8. I understand that I shall treat the chaperones as I treat my directors- with respect and compliance.
9. I will be ON TIME to all meeting locations, either in the morning before breakfast, in the afternoon between parks, or in the evening after park closing. I understand that to keep others waiting on the bus is extremely rude, and I will lose park time if I am late.

I furthermore pledge that I will act in accordance with that which my directors and chaperones ask of me. My conduct will always reflect that of a mature lady or gentleman. In as much as I have given my word and pledged myself to the above, I do know that failure to comply with any policies will result in serious actions against me.

Student's Signature _____

I give permission for my child to watch PG or PG-13 movies on the bus. I am aware that if my child earns two or more days of ISS OR any OSS during the second semester, my child will be removed from trip, and the money is NON refundable. I have read the statements above and understand that my child must uphold these expectations. I understand that my son or daughter will be punished appropriately for minor infractions by the loss of park time or free time. I understand that if my son or daughter is involved in a major infraction before the end of the trip, the consequence will be handled by NMS administration according to Fulton County policy and I may be expected to provide immediate return transportation for my child.

Parent's Signature _____



This Code of Conduct adapted from Essential Technique for Strings by Allen, Gillespie, and Hayes.

Northwestern Middle School Chorus and Orchestra 2019 Disney Performance Trip Medical Form

The information requested on this form must be submitted as part of the requirement for participating in an overnight trip with Northwestern Middle School Chorus or Orchestra. The information will be treated in a confidential manner and utilized only in matters concerning the health and welfare of the student concerned. If your child's medical condition changes or you have any changes in your insurance, please notify the director before the trip. Please fill out the entire form completely, but **DO NOT SIGN IT. It must be signed in the presence of a notary. Please attach a photocopy of the front and back of your health insurance card.**

Student Name:		Birthdate:	
Parents or Guardians:			
Home Address:			
City:		State: Georgia	Zip:
Home Phone:		Cell Phone:	
Cell Phone:		Work Phone:	
Name and Phone Number of Person <u>Other Than Parent</u> to Notify in Case of Emergency:			
Prior illnesses or surgeries:			
Existing Medical Conditions:			
Allergies:			
Medications, dosage, and times:			
Family Physician:		Phone:	
Surgeon/Orthopedist:		Phone:	
Other Specialist:		Phone:	
Name of Insurance Company:		Policy#:	
Name of Insured:		Group#:	

Authorizations for the attending physician to render whatever treatment he/she deems best for the person's emergencies:

A. Permission is granted for the directors or chaperones to administer first aid, and to obtain the services of a licensed physician, and to arrange transportation to a medical facility in case the person named is seriously ill or injured and requires hospitalization. The responsibility for all expenses incurred will be assumed by the person whose signature appears below.

B. I hereby release and discharge the directors and the volunteer chaperones, from all liability in case of accident or any other injury which might occur to my child through administering first aid, transporting to a medical facility, and I hereby release said aforementioned officials from any liability because of any injury or damage which might occur.

C. I agree to release, indemnify, and hold harmless or reimburse the Fulton County School District (District), its Board of Education, and its members, employees, agents, representatives, successors or assignees, as well as its approved adult trip supervisors ("District Indemnites") from and forever promise not to sue them on any and all claims, demands, rights, causes of action, liabilities, losses, damages, costs and expenses (including reasonable attorneys' fees), whether known or unknown, that I, any other parent or guardian of the above-named student, the student or any other successor or assignee may have or may allege to have against the District Indemnites or which may be brought against the District Indemnites arising out of or in any manner relating to the student's participation in the field trips, including but not limited any losses, damages or injuries or to the rendering of emergency medical procedures or treatment.

SIGNATURE OF PARENT/GUARDIAN

Signed and sealed before me this

_____ day of _____, 2019.

SIGNATURE OF NOTARY

Northwestern Middle School Chorus and Orchestra 2019 Disney Performance Trip

Medications

If a health issue should arise, it is vital that the staff know what medicines the student has access to. Please, only let your student carry medications that have an SHS-1 or an SHS-2 form completed for them and on file with the clinic/staff.

The ***SHS-1 form*** is to be completed and signed by the parent, if you want the staff to keep and dispense the medicine to the student as required.

The ***SHS-2 form*** is to be completed and signed by the parent and the student, if you want the student to be able to carry the medicine and take it as required.

- Fulton County approved over-the-counter medications that may be carried by students: acetaminophen (Tylenol), antacids, aspirin, cough/throat lozenges, ibuprofen (Advil), Midol & oral antihistamines.
- Fulton County approved prescription medicines that may be carried by students: Inhaler, EpiPen, & Insulin. Other prescription medications must be approved by the Cluster Nurse for the student to carry them and self-administer.

Any prescription medicine, regardless of who is carrying & responsible for it, ***requires the prescribing physician to complete and sign the authorization form*** [SHS-1 or SHS-2].

All medication must be in its ORIGINAL container from the store or pharmacy- NO PILL CASES ALLOWED.

If, for this school year, you have already completed an SHS-1 or SHS-2 form for medication, you do not need to duplicate the paperwork. ***All forms and medication already in the clinic will automatically accompany the student*** on the field trip with the chaperone.



Student Health Services SHS-2 Form

School Year: _____

Authorization for Students to Carry a Prescription Inhaler, Epipen, Insulin, or Other Approved Medication*
(JGCD Operating Guideline on Medication Administration and Storage)

Student Name _____ Grade _____ DOB _____

(PRINT LEGIBLY)

I AGREE TO THE FOLLOWING: (ONE MEDICATION PER FORM) – SUBMIT FORM TO THE SCHOOL CLINIC

- I need to carry the following prescription-labeled inhaler, Epipen, insulin, and/or approved medication _____
(PRINT NAME OF MEDICATION LEGIBLY)
- I have been instructed in the proper use of my labeled medication and fully understand how it is administered. I will keep this medication with me and on my person at all times. I will not allow another student to use my medication and/or medical supplies under any circumstances. I also understand that should another student use my prescription or medication, the privilege of carrying my medication may be reassessed and/or revoked. I also accept the responsibility for notifying the Clinic Assistant or Cluster School Nurse/ Special Education Nurse each time I take my medication. If on a field trip, I will notify the teacher/FCS staff chaperone.

Student Signature

Date

(Student Health Services strongly encourages each student to keep a second prescription inhaler, Epipen, additional Insulin or other prescribed emergency medication in the school clinic in case of emergency and in the event the self-carried medication is lost or left at home.)

To Be Completed by Parent/Guardian

I hereby request that the above named student, over whom I have legal guardianship, be allowed to carry and use this medication at school:

- I accept legal responsibility should the medication be lost, or not immediately available, given, or taken by a person other than the above named student. I understand that if this happens, the privilege of carrying the medication may be reassessed and/or revoked;
- I accept the responsibility to inform the school of all medication changes or new dosages, and will submit a new form to reflect each change;
- Medications must be in their original labeled container;
- I release Fulton County School System and its employees of any legal responsibility when supervising or assisting in this medication administration or when the above named student administers his/her own medication (to include choking, allergic reaction, side effects and/or health risks related to this medication);
- Completion of this form authorizes Student Health Services to discuss this medication order/request with the prescribing healthcare provider if indicated or needed.

Parent/Legal Guardian Signature

Print Name Legibly

Date

Home Phone: _____ Work Phone: _____ Cell phone: _____

Healthcare Provider and Parent/Guardian: Please turn form over for additional information and instructions.

STUDENT NAME:	GRADE:	DOB:
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To be completed by the Physician/Healthcare Provider
(For Prescription Medication ONLY - must be labeled and in its original container)

MEDICATION NAME:	PRESCRIBED DOSAGE:
POSSIBLE SIDE EFFECTS:	
ADMINISTRATION, ROUTE AND OTHER SPECIAL INSTRUCTIONS:	
DIAGNOSIS/CONDITION OR ILLNESS REQUIRING MEDICATION:	

Physician's Signature _____
Date

Physician's Name (please PRINT legibly): _____

Office/Contact Number: _____ Fax: _____

To Be Completed by Parent/Guardian

Emergency Contact Name and Number:

Name: _____ Home Phone: _____
 Work Phone: _____ Cell Phone: _____

*Other Approved Medication – shall be defined as prescribed medication used for emergency purposes and/or medication approved by Student Health Services in collaboration with the student's parent/guardian or healthcare provider.

Fulton County Schools System reserves the right to seek emergency medical treatment for the student when deemed necessary and appropriate.

This form is effective only for this school year and includes all school sponsored Fulton County Schools System activities and summer school.

Cluster School Nurse/Special Education Nurse Signature _____
Date Received

This Section to be completed by Clinic Assistant/Cluster School Nurse/Special Education Nurse ONLY

Date Received:	Medication Name:	# of Doses:
Expiration Date:	Completed by:	Date Returned to Legal Guardian:

Creative GROUP TOURS

NORTHWESTERN MIDDLE SCHOOL MUSIC
ORLANDO / DISNEY PERFORMANCE TOUR
MARCH 6-10, 2019

TENTATIVE ITINERARY
UPDATE 1/28/19

Wednesday, March 6

- 11:30 a.m. Buses arrive at school to load luggage and equipment.
- 12:00 p.m. Depart school for travel to Florida.
Dinner stop enroute at your expense.
- 9:30 p.m. Arrive at hotel. Check-in and get settled into rooms.
- 11:00 p.m. Room check by chaperones.

Thursday, March 7

- 7:00 a.m. Wake-up call by chaperones.
- 7:45 a.m. Breakfast buffet in assigned room at hotel.
- 8:30 a.m. Return to rooms to gather performance attire.
- 8:45 a.m. Board buses with performance clothes and depart hotel for EPCOT.
- 9:15 a.m. Arrive at group parking for EPCOT. Enter park for the day.
Lunch or dinner with meal voucher provided. Other meal at your expense.
ORCHESTRA - BE SURE TO EAT LUNCH BEFORE 12:00 p.m.
- 12:30 p.m. ORCHESTRA – Members report to bus in uniform with instruments and change of clothes for park.
Board and depart for Disney Springs pre-show area.
- 1:00 p.m. ORCHESTRA - Arrive at pre-show area for the *Marketplace Stage/Disney Springs*. Meet Disney GTC.
- 2:00 p.m. ORCHESTRA - Board bus and depart for staging area. Walk to *Marketplace Stage*.
- 2:15 p.m. ORCHESTRA - Performance begins.
- 2:45 p.m. ORCHESTRA - Following conclusion of performance. Return to bus to travel to pre-show area.
ORCHESTRA - Change back to casual clothes. Load performance attire and instruments onto bus.
Board and depart for *EPCOT*.
- 3:00 p.m. CHORUS – Report to buses in group parking. Board and depart for Pre-show area/*Disney Springs*.
CHORUS – Dress and warm-up for performance.
- 3:15 p.m. ORCHESTRA - Enter *EPCOT* for the remainder of the day. Lunch or dinner with meal voucher provided.
- 4:10 p.m. CHORUS – Board buses and depart for staging area. Walk to *Marketplace Stage*.
- 4:30 p.m. CHORUS – Performance begins.
- 5:00 p.m. CHORUS – Following conclusion of performance, return to buses, board and depart for pre-show area.
- 5:20 p.m. CHORUS – Change back to park clothes. Load performance clothes onto buses, board and depart for *EPCOT*.
- 6:00 p.m. CHORUS – Arrive back at group parking for *EPCOT*. Enter park for the remainder of the day.
- 8:30 p.m. ALL GROUP MEMBERS - Report to designated location around World Showcase Lagoon for laser/pyrotechnic show.
- 9:00 p.m. Park closes. *IllumiNations!* show begins.
- 9:20 p.m. Following conclusion of show, report to buses in group parking. Board and depart for hotel.
- 10:00 p.m. Arrive at hotel.
- 11:00 p.m. Room check by chaperones.

Friday, March 8

- 7:00 a.m. Wake up call by chaperones.
- 7:45 a.m. Breakfast buffet in assigned banquet room at hotel.
- 8:30 a.m. Report to buses. Depart for *Hollywood Studios*.
- 9:00 a.m. Arrive at group parking for *Hollywood Studios*. Enter park for the day.
Lunch or dinner with meal voucher provided. Other meal at your expense.

Friday, March 8, continued

- 6:15 p.m. Meet at entrance to amphitheatre for *Fantasmic!*
- 8:00 p.m. *Fantasmic!* begins.
- 8:30 p.m. Park closes. *Star Wars: A Galactic Spectacular* begins on Hollywood Boulevard.
- 8:45 p.m. Report to buses in group parking.
- 9:00 p.m. Board buses and depart for hotel.
- 9:30 p.m. Buses arrive at hotel. Pack for tomorrow's departure.
- 11:00 p.m. Room check by chaperones.

Saturday, March 9

- 6:15 a.m. Wake-up call by chaperones.
- 7:00 a.m. Breakfast buffet in assigned banquet room at hotel.
- 7:30 a.m. Return to rooms to gather belongings.
- 7:45 a.m. Report to bus with luggage and instruments. Turn room keys in to designated chaperone.
- 8:00 a.m. Depart for *Magic Kingdom*.
- 8:30 a.m. Arrive at group parking for *Magic Kingdom*. Ride monorail or ferry to main gates.
(BUS DRIVERS RETURN TO HOTEL TO REST BEFORE OVERNIGHT TRIP HOME).
- 9:00 a.m. Enter park for the day. Lunch or dinner with meal voucher provided. Other meal at your expense.
- 3:00 p.m. *Festival of Fantasy Parade* on Main Street.
- 8:00 p.m. Park closes. *Happily Ever After* nighttime spectacular begins at Cinderella's Castle.
Following conclusion of show, meet at designated location near main entrance.
- 8:30 p.m. Ride monorail or ferry back to group parking.
- 9:15 p.m. Report to buses in group parking. Board and depart for trip home.
- 9:30 p.m. Stop at Turkey Lake turnpike plaza to use restrooms and change to comfortable clothes for ride home.
- 9:45 p.m. Buses depart for remainder of trip home.

****DAYLIGHT SAVINGS TIME BEGINS TONIGHT!!! TURN CLOCKS FORWARD ONE HOUR.****

Sunday, March 10

- 7:00 a.m. Arrive at NMS. Unload luggage and head home.

****DISNEY PARK CLOSING TIMES AND PERFORMANCE TIMES AND LOCATIONS SUBJECT TO CHANGE AT DISNEY DISCRETION.**

ITINERARY TIMES ARE BASED ON BUS DRIVER HOURS/MILEAGE REQUIREMENTS. DRIVERS MUST HAVE A FULL 9 HOURS OFF AFTER DRIVING BEFORE THEY MAY OPEN THE BUS AGAIN FOR THE NEXT DAY'S ACTIVITIES.

MAKE ALL GROUP MEMBERS AWARE THAT ALL BAGS WILL BE INSPECTED AT ENTRANCE TO EACH PARK.

We are staying at a Holiday Inn in the Orlando area. Parents, please do not attempt to contact the hotel or travel company directly. Speak to a director if you have a question or issue. Thank you!