



# WILDCAT BANDS

Mr. David Wood, High School Band Director  
937-783-2461 ext. 4075, [woodd@blan.org](mailto:woodd@blan.org)

March 24, 2017

Dear Marching Wildcats Parents and Members,

I hope you each are doing well! As we look forward to the 2017-2018 school year it is time to take care of some paperwork.

Please find attached a portion of the 2017-2018 Blanchester High School Marching Wildcats and Concert Band Handbook. In this packet you will find fee information, the marching band calendar, the Ohio Department of Public Health Concussion Information Sheet, student information sheet, and the Handbook Agreement/Commitment Form.

We have included the concussion information as band is both a musical and physical activity. We need to make certain all participants and parents clearly understand that while fairly rare in band, there is the risk for injury with any physical activity.

Please read the handbook found under the HS Band tab of the music department website at: <http://blanchestermusic.weebly.com/>. Then please sign and return **all** the forms by Thursday, March 30, 2017.

Please do not hesitate to contact me with any questions you may have.

Musically Yours,



Mr. David Wood, Band Director

## 2017 Marching Wildcats Calendar

### Spring

March 10	Band Leadership Application Packets Released
March 17, 24, April 12	Field Commander Clinics-2:45 to 3:30pm
April 10, 11, 13	Student Leadership Training Sessions-2:45pm-4:30pmish
April 24, 25, 26, 27	Drum Line Placements- 2:45 to 4:15pm
April 24, 25, 26, 27	Color Guard Clinics and Auditions-5pm-8pm
April 26	Field Commander Auditions in High School band class.
April 28	Student Leadership Team Announced
May 1, 2	New students marching basics 2:45-3:30pm
May 3, 10, 17	Parade Rehearsals 3:00-4:30pm
May 15	High School Band and Choir Concert and Awards Ceremony
May 16	Middle School Spring Concert
May 16	6-8pm Physicals, \$10.00 at Wilmington College, Center for Sports Sciences, 720 Elm Street, Wilmington, OH
Download forms at <a href="http://www.ohsaa.org">www.ohsaa.org</a> and fill out before going to the session	
<u>For Band the physicals must be filed with Mr. Wood or the athletic director before July 1</u>	
May 18, 22	Graduation Band Rehearsal-2:45-4:00pm
May 23	HS Awards Ceremony-9am-Graduation Band Plays
May 28	Graduation Band-1:15-3:30pm
May 29	Memorial Day Parade-meet behind 1 <sup>st</sup> National Bank at 9:20am

### Summer

May 30, 31	Mini-Camp 8am-Noon
June 3	Rifle Clinic 8am to Noon for all color guard
June 5, 6, 7	Color Guard Sectionals-5-7:30pm
June 26	Summer Music Games Cincinnati (some free tickets if we host a corps)
June 27, 29	Parade Rehearsals 7 to 9pm
July 4	Parade Line up at BHS 10:00a.m. Parade begins at 11:00am
July 17-20	<b><u>Mandatory</u></b> Pre-Camp Monday through Thursday 5pm to 9pm
July 22	Reds Game
July 24-28	<b><u>Mandatory</u></b> Band Camp at BHS Mon. through Fri. 8am to 8:30pm
July 28	6pm Marching Band Carry-in and Cook-out, Parent Show 7:30pm
July 31, Aug 1, 3	Rehearsals 8am to Noon
August 1	Soaring Sounds Drum Corps Event-Cost is \$15-\$20 + dinner
August 8, 9, 10	Rehearsals 8am to Noon
August 13	Mattress Sale
August 14	6 to 8:30pm
August 17	3 to 5pm (first school day)

Continued on next page

**Fall**

August 21 First full week of school, we begin regular rehearsals  
Mondays-6 to 8:30pm, Wednesdays-Sectionals/Full Band 3:00 to 5:00pm  
Weekly Color Guard Sectional on Thursdays 6 to 8:30pm  
Weekly Percussion Sectional TBA

**\*\*In October we will change Monday rehearsals to 5:30 to 7:30pm due to darkness\*\***

For home games we are in uniform by and warm-up at 6:15pm  
Depending on weather we wear summer uniform for the first two or three game.  
For away games the leave time depends on game locations

Friday, August 25	Washington Court House	Away 7pm
Friday, September 1	Mariemont	Home 7pm
Friday, September 8	Waynesville	Home 7pm
Saturday, September 9	Corn Festival Parade	10am Start
Friday, September 15	Wilmington	Away 7pm
Friday, September 22	Goshen	Away 7pm
Friday, September 29	Bethel-Tate	Home 7pm (Homecoming)
Friday, October 6	Williamsburg	Away 7pm
Friday, October 13	CNE	Home 7pm (Youth Night)
Friday, October 20	Fayetteville	Away 7pm
Friday, October 27	East Clinton	Home 7pm (Senior night)
Monday/Tuesday, November 20 & 21	Parade Rehearsals, 2:45 to 3:30pm	
Saturday, November 25?	Holidazzle Parade in Wilmington 5pm to 9pm	

**Tentative Marching Band Competition Schedule**

**On Website Calendar these are shown as “Band Competition” until confirmed.**

Saturday, September 23	OMEA-Hamilton HS 5pm event start
Saturday, October 7	OMEA-Loveland HS 5pm event start
Saturday, October 14	OMEA at OSU 10am start, or Kettering 4pm start
Saturday, October 22	OMEA-Anderson HS—2pm event start time

**Do not schedule ACT this date! Leave time may be during the morning.**

Sunday, October 29 or November 5, OMEA State Marching Band Finals (must qualify)-  
UD

## Blanchester Marching Wildcats Fees 2017

Please make checks to Blanchester Music Boosters. Please bring checks in a sealed envelope to Mr. Wood at rehearsals. Place student's name on the memo line of the check. If cash, please place in a sealed envelope with student's name and enclosed amount. Students will receive receipts as quickly as possible.

### New Marcher

Band Shirt	\$15
Show Shirt	\$15
Uniform Maintenance	\$10
Gloves	\$4
Shoes	\$35
Lyre/Flip Folder	\$10
Camp Food	\$35
<b>Total:</b>	<b>\$124</b>

### Veteran Marcher

\$15
\$15
\$10
\$4
\$0-Unless student needs replacement
\$0-Unless student needs a replacement
<u>\$35</u>
<b>\$79</b>

<b>Payment Plan:</b>	<b>New Member</b>
<b>May 1</b>	<b>\$45</b>
<b>May 30</b>	<b>\$45</b>
<b>June 29</b>	<b>\$34</b>
<b>Total</b>	<b>\$124</b>

<b>Veteran</b>
<b>\$45</b>
<b>\$19</b>
<b><u>\$15</u></b>
<b>\$79</b>

### New Color Guard

Band Shirt	\$15
Show Shirt	\$15
Uniform Maintenance	\$15
Shoes	\$35
Warm-ups	\$60
Gloves	\$15
Camp Food	\$35
<b>Total:</b>	<b>\$190</b>

### Veteran Color Guard

\$15
\$15
\$15
\$0-Unless student needs a replacement
\$0-Unless student needs a replacement
\$15
<u>\$35</u>
<b>\$95</b>

Color members will supply their own long sleeved, black under armor type shirt to wear under the guard uniform top when the weather turns colder.

### Color Guard Payment Plan:

	<b>New Color Guard</b>	<b>Veteran Color Guard</b>
<b>May 1</b>	<b>\$50</b>	<b>\$40</b>
<b>May 30</b>	<b>\$50</b>	<b>\$40</b>
<b>June 29</b>	<b>\$50</b>	<b>\$15</b>
<b>July 17</b>	<b>\$40</b>	<b><u>\$0</u></b>
<b>Total</b>	<b>\$190</b>	<b>\$95</b>

# Ohio Department of Health Concussion Information Sheet

## For Interscholastic Athletics

Dear Parent/Guardian and Athletes,

This information sheet is provided to assist you and your child in recognizing the signs and symptoms of a concussion. Every athlete is different and responds to a brain injury differently, so seek medical attention if you suspect your child has a concussion. Once a concussion occurs, it is very important your athlete return to normal activities slowly, so he/she does not do more damage to his/her brain.

### What is a Concussion?

A concussion is an injury to the brain that may be caused by a blow, bump, or jolt to the head. Concussions may also happen after a fall or hit that jars the brain. A blow elsewhere on the body can cause a concussion even if an athlete does not hit his/her head directly. Concussions can range from mild to severe, and athletes can get a concussion even if they are wearing a helmet.

### Signs and Symptoms of a Concussion

Athletes do not have to be “knocked out” to have a concussion. In fact, less than 1 out of 10 concussions result in loss of consciousness. Concussion symptoms can develop right away or up to 48 hours after the injury. Ignoring any signs or symptoms of a concussion puts your child's health at risk!

#### Signs Observed by Parents of Guardians

- ◆ *Appears dazed or stunned.*
- ◆ *Is confused about assignment or position.*
- ◆ *Forgets plays.*
- ◆ *Is unsure of game, score or opponent.*
- ◆ *Moves clumsily.*
- ◆ *Answers questions slowly.*
- ◆ *Loses consciousness (even briefly).*
- ◆ *Shows behavior or personality changes (irritability, sadness, nervousness, feeling more emotional).*
- ◆ *Can't recall events before or after hit or fall.*

#### Symptoms Reported by Athlete

- ◆ *Any headache or “pressure” in head. (How badly it hurts does not matter.)*
- ◆ *Nausea or vomiting.*
- ◆ *Balance problems or dizziness.*
- ◆ *Double or blurry vision.*
- ◆ *Sensitivity to light and/or noise*
- ◆ *Feeling sluggish, hazy, foggy or groggy.*
- ◆ *Concentration or memory problems.*
- ◆ *Confusion.*
- ◆ *Does not “feel right.”*
- ◆ *Trouble falling asleep.*
- ◆ *Sleeping more or less than usual.*

### Be Honest

Encourage your athlete to be honest with you, his/her coach and your health care provider about his/her symptoms. Many young athletes get caught up in the moment and/or feel pressured to return to sports before they are ready. It is better to miss one game than the entire season... or risk permanent damage!

### Seek Medical Attention Right Away

Seeking medical attention is an important first step if you suspect or are told your child has a concussion. A qualified health care professional will be able to determine how serious the concussion is and when it is safe for your child to return to sports and other daily activities.

- ◆ *No athlete should return to activity on the same day he/she gets a concussion.*
- ◆ *Athletes should **NEVER** return to practices/games if they still have ANY symptoms.*
- ◆ *Parents and coaches should never pressure any athlete to return to play.*

### The Dangers of Returning Too Soon

Returning to play too early may cause Second Impact Syndrome (SIS) or Post-Concussion Syndrome (PCS). SIS occurs when a second blow to the head happens before an athlete has completely recovered from a concussion. This second impact causes the brain to swell, possibly resulting in brain damage, paralysis, and even death. PCS can occur after a second impact. PCS can result in permanent, long-term concussion symptoms. The risk of SIS and PCS is the reason why no athlete should be allowed to participate in any physical activity before they are cleared by a qualified health care professional.

### Recovery

A concussion can affect school, work, and sports. Along with coaches and teachers, the school nurse, athletic trainer, employer, and other school administrators should be aware of the athlete's injury and their roles in helping the child recover.

During the recovery time after a concussion, physical and mental rest are required. A concussion upsets the way the brain normally works and causes it to work longer and harder to complete even simple tasks. Activities that require concentration and focus may make symptoms worse and cause the brain to heal slower. Studies show that children's brains take several weeks to heal following a concussion.



[www.healthyohiprogram.gov/vipp/concussion](http://www.healthyohiprogram.gov/vipp/concussion)

## What is a Concussion?

1. Be sure your child gets plenty of rest and enough sleep at night – no late nights. Keep the same bedtime weekdays and weekends.
2. Encourage daytime naps or rest breaks when your child feels tired or worn-out.
3. Limit your child's activities that require a lot of thinking or concentration (including social activities, homework, video games, texting, computer, driving, job-related activities, movies, parties). These activities can slow the brain's recovery.
4. Limit your child's physical activity, especially those activities where another injury or blow to the head may occur.
5. Have your qualified health care professional check your child's symptoms at different times to help guide recovery.

## Returning to School

1. Your athlete may need to initially return to school on a limited basis, for example for only half-days, at first. This should be done under the supervision of a qualified health care professional.
2. Inform teacher(s), school counselor or administrator(s) about the injury and symptoms. School personnel should be instructed to watch for:
  - a. Increased problems paying attention.
  - b. Increased problems remembering or learning new information.
  - c. Longer time needed to complete tasks or assignments.
  - d. Greater irritability and decreased ability to cope with stress.
  - e. Symptoms worsen (headache, tiredness) when doing schoolwork.
3. Be sure your child takes multiple breaks during study time and watch for worsening of symptoms.
4. If your child is still having concussion symptoms, he/she may need extra help with school-related activities. As the symptoms decrease during recovery, the extra help or supports can be removed gradually.

### Resources

ODH Violence and Injury Prevention Program  
[www.healthyohioprogram.org/vipp/injury.aspx](http://www.healthyohioprogram.org/vipp/injury.aspx)

Centers for Disease Control and Prevention  
[www.cdc.gov/Concussion](http://www.cdc.gov/Concussion)

National Federation of State High School Associations  
[www.nfhs.org](http://www.nfhs.org)

Brain Injury Association of America  
[www.biausa.org/](http://www.biausa.org/)

## Returning to Play

1. Returning to play is specific for each person, depending on the sport. Ohio law requires written permission from a health care provider before an athlete can return to play. Follow instructions and guidance provided by a health care professional. It is important that you, your child and your child's coach follow these instructions carefully.
2. Your child should NEVER return to play if he/she still has ANY symptoms. (Be sure that your child does not have any symptoms at rest and while doing any physical activity and/or activities that require a lot of thinking or concentration).
3. Be sure that the athletic trainer, coach and physical education teacher are aware of your child's injury and symptoms.
4. Your athlete should complete a step-by-step exercise-based progression, under the direction of a qualified healthcare professional.
5. A sample activity progression is listed below. Generally, each step should take no less than 24 hours so that your child's full recovery would take about one week once they have no symptoms at rest and with moderate exercise.\*

### Sample Activity Progression\*

*Step 1: Low levels of non-contact physical activity, provided NO SYMPTOMS return during or after activity. (Examples: walking, light jogging, and easy stationary biking for 20-30 minutes).*

*Step 2: Moderate, non-contact physical activity, provided NO SYMPTOMS return during or after activity. (Examples: moderate jogging, brief sprint running, moderate stationary biking, light calisthenics, and sport-specific drills without contact or collisions for 30-45 minutes).*

*Step 3: Heavy, non-contact physical activity, provided NO SYMPTOMS return during or after activity. (Examples: extensive sprint running, high intensity stationary biking, resistance exercise with machines and free weights, more intense non-contact sports specific drills, agility training and jumping drills for 45-60 minutes).*

*Step 4: Full contact in controlled practice or scrimmage.*

*Step 5: Full contact in game play.*

**\*If any symptoms occur, the athlete should drop back to the previous step and try to progress again after a 24 hour rest period.**



**Ohio Department of Health**  
Violence and Injury Prevention Program  
246 North High Street, 8th Floor  
Columbus, OH 43215  
(614) 466-2144

[www.healthyohioprogram.gov/vipp/concussion](http://www.healthyohioprogram.gov/vipp/concussion)

# Ohio Department of Health Concussion Information Sheet

## *For Interscholastic Athletics*

I have read the Ohio Department of Health's Concussion Information Sheet and understand that I have a responsibility to report my/my child's symptoms to coaches, administrators and health care provider.

I also understand that I/my child must have no symptoms before return to play can occur.

\_\_\_\_\_  
Athlete

\_\_\_\_\_  
Date



Rev. 01.13

\_\_\_\_\_  
Athlete  
*Please print name*

\_\_\_\_\_  
Parent/Guardian  
*Signature*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian  
*Please print name*

# Blanchester Wildcat Band Student Information Sheet

Return this form by Thursday, March 30, 2017.

Returning members only fill out your name and items that have changed since last year. Everyone update shirt sizes.

Please provide as much information as possible, it will help to check the band database, as well as facilitate summer communication.

Name \_\_\_\_\_ Grade \_\_\_\_\_ Age \_\_\_\_\_

Parent(s)/Guardian \_\_\_\_\_

Address \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Parent Cell Phone Number \_\_\_\_\_

Student Cell Phone Number \_\_\_\_\_

Current Student Email (s) \_\_\_\_\_

Current Parent Email (s) \_\_\_\_\_

Parent(s)/Guardian Work phone number \_\_\_\_\_

Shirt Size \_\_\_\_\_

\_\_\_\_ Parent/Guardian has completed the Music Booster Talent Survey located at: <http://blanchestermusic.weebly.com/boosters.html>

## Personal Instrument Information

Instrument \_\_\_\_\_ Brand \_\_\_\_\_

Model (ex. R11, 88H, 42T0) \_\_\_\_\_

Mouthpiece Size (ex. Brass 12C) \_\_\_\_\_

Instrument Serial Number \_\_\_\_\_



# 2017-2018 Wildcat Band Handbook Agreement/Commitment Form

Return this form by Thursday, March 30, 2017

We have read and understand the policies contained in The Blanchester High School Marching Wildcats and Concert Band Handbook, the required fees, as well as the rehearsal and performance dates and times provided. The band handbook is found online at <http://blanchestermusic.weebly.com>

We understand the large commitment to the band program.

As band is a musically demanding activity, it is also a physically demanding activity. Therefore, we acknowledge the risk for injury.

Insurance Waiver - We do hereby assume full responsibility for any risk of bodily injury, personal injury or mental injury or death due to our child's participation in these activities and the necessary travel to and from any activity site.

We also further hereby assume full responsibility for all lost, stolen, or damaged personal property and will not hold the school or its employees responsible for said loss or damage to personal property. The undersigned further release, waive, discharge and covenant not to sue the Blanchester Local School District Board of Education, its individual members, its superintendent, principals, administrators, employees, agents or anyone acting on its behalf, from all liability, arising from or by reason of any bodily injury, personal injury or mental injury, known or unknown, including death, resulting from, or to result from our child's participation band activities with Blanchester Local Schools. We expressly agree that this release is intended to be as broad and inclusive as permitted by the laws of the State of Ohio or any other state in which said student may be injured and that if any portion of this release is held invalid, it is agreed that the balance shall, nevertheless, continue in full force and effect. We further state that we have fully and carefully read the above release and know the contents of the same and sign this release as our own free act. We further consent to emergency treatment by a physician in the event of injury to or illness of our child during his/her participation in such activities. I, the undersigned parent/guardian of the undersigned band member, certify that we have adequate and sufficient insurance coverage on our student and agree to accept full financial responsibility and agree to release the Blanchester Local School Board of Education and all of their employees from any obligations that pertain to financial responsibility in these matters.

By signing this form, as the parent/guardian of the student-musician named below, I acknowledge receiving a copy of the concussion and head injury information sheet prepared by the Ohio Department of Health as required by section 3313.539 of the Revised Code.

I understand concussions and other head injuries have serious and possibly long-lasting effects. By reading the information sheet, I understand I have a responsibility to report any signs or symptoms of a concussion or head injury to directors/coaches, administrators and my student-musician's doctor. I also understand that directors/coaches, referees and other officials have a responsibility to protect the health of the student-musicians and may prohibit my student-musician from further participation in music programs until my student-musician has been cleared to return by a physician or other appropriate health care professional.

\_\_\_\_\_ Permission is given to publish our contact information in a band membership directory to facilitate communication among the band members and parents.

\_\_\_\_\_ Permission is given to use the student's name and photo/video in various media including, but not limited to, the newspaper, school website, booster Facebook page, etc.

Printed Student Name \_\_\_\_\_

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

Printed Parent Name \_\_\_\_\_

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

Parents: If you would like to chaperone any of our band trips this fall please list the date(s)/event(s):