



January 20, 2020

Dear NC South Central District Middle School Band Student:

Congratulations! Because of your successful audition in this year's South Central District All-District Band Auditions, the Charlotte Concert Band ([www.charlotteconcertband.org](http://www.charlotteconcertband.org)) would like to invite you to participate in its inaugural "Musician for a Lifetime" concert on **Sunday, May 3, 2020** at the beautiful Knight Theatre at the Levine Center for the Arts in Uptown Charlotte.

This is a wonderful opportunity for students to play two selections alongside accomplished adult musicians as we present an exciting musical evening of favorites from the circus band tradition! This program, which we offer to the middle school community biennially, aims to provide a rewarding musical experience to Charlotte-area middle school musicians as well as expose them to the performance opportunities that await them as they enter college and adulthood.

**Rehearsal Dates:**

**Tuesday, April 21** Registration from 6:00-6:30, Rehearsal 7:15-8:15 at Pritchard Memorial Baptist Church/1117 South Boulevard/Charlotte

**Tuesday, April 28** Pritchard Memorial Baptist Church 7:15 PM-8:15 PM

**Concert Date:**

**Sunday, May 3** Knight Theater, 430 S. Tryon St., Charlotte, 5:00 PM.

1:45 PM Arrival. Parent(s) drop off students at this address, and students will be ushered into the building and dressing rooms to initial name for attendance purposes. At this point, students should be wearing casual clothes, but they will have to have their concert clothes with them in a labeled garment bag. Students should also bring a snack to keep in the dressing room for later.

2:15 PM Students will proceed to backstage area with instruments (cases will be left in dressing area).

2:30 PM Students will rehearse each of the two selections with the band.

3:00 PM End Rehearsal. Students will return to dressing areas to put instruments away and eat snacks.

3:45 PM Students will be shown where their seats will be in the auditorium while not performing.

4:15 PM Students will dress for the concert in dressing rooms.

4:40 PM Students will proceed to their seats dressed for the concert without instruments.

5:00 PM Concert starts with CCB playing.

5:55 PM Intermission. Students proceed to the dressing rooms to retrieve instruments.

6:15 PM Second set begins with student musicians accompanying the CCB.

Following the student selections, the students will go back to the changing rooms to put instruments away and then will return to their seats for the remainder of the concert.

7:00 PM Concert concludes. Students return to the dressing rooms to retrieve instruments and meet parents in the lobby.



**IMPORTANT: PARTICIPATING STUDENTS MUST AGREE TO  
ATTEND ALL REHEARSALS AND THE CONCERT  
AND ADHERE TO THE DEADLINES IN THIS PACKET**

Online pre-registration: Interested students must fill out the google form at the following address before **February 15**: <https://goo.gl/forms/3DGZGYZluxy32esM2>

The registration fee is **\$10.00** per student. Checks should be made payable to Charlotte Concert Band and should be mailed to the CCB at 703 Rollerton Rd., Apt. 301/Charlotte, NC 28205. You may also pay via PayPal at [www.charlotteconcertband.org](http://www.charlotteconcertband.org). All payments are due by **February 15**.

This will be a ticketed event. Parents, friends and family members interested in purchasing tickets may visit [www.blumenthalarts.org](http://www.blumenthalarts.org).

At registration at the first rehearsal, April 21 students will receive name tags. Students must wear these name tags at all times. They will not be allowed entry to the Knight Theater without the name tag.

Students should dress up for the concert in all black or black and white.

Brass players should bring all mutes. Woodwinds should bring extra reeds. Percussionists should bring all necessary sticks and mallets. The band will provide accessory percussion, music stands and chairs.

Students should be respectful for property, facilities, and equipment at all times.

Please direct all inquiries to CCB President, Megan Tuttle at [president@charlotteconcertband.org](mailto:president@charlotteconcertband.org) or CCB Director, Mr. Drew Carter at [director@charlotteconcertband.org](mailto:director@charlotteconcertband.org). For more information about the Charlotte Concert Band, including photos, historical archives, audio clips and other future dates, please visit [www.charlotteconcertband.org](http://www.charlotteconcertband.org). Also, make sure to visit and "like" the band on Facebook.



## Charlotte Concert Band Musician for a Lifetime Permission Form

I hereby certify that my son/daughter, \_\_\_\_\_,  
has my permission to attend the Charlotte Concert Band Musician for a Lifetime events. I  
further certify that my son/daughter will attend all of the rehearsals and the concert according  
to the following schedule:

Tuesday, April 21

Rehearsal at Pritchard Memorial Baptist Church  
1117 South Blvd./Charlotte  
7:15 PM-8:15 PM

Tuesday, April 28

Rehearsal at Pritchard Memorial Baptist Church  
1117 South Blvd./Charlotte  
7:15 PM-8:15 PM

Sunday, May 3

Pre-Concert Rehearsal and Concert at Knight Theater  
430 S Tryon St, Charlotte, NC 28202  
1:45 PM-7:00 PM

I understand that my son/daughter must follow standard rules of behavior, consistent with the  
policies of my school (no possession or use of alcohol, narcotics, weapons, etc.). I further  
understand that behavior that is detrimental to the rehearsal process may result in the student's  
dismissal from the CCB Musician for a Lifetime events.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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



# MEDICAL RELEASE

# FORM

I, parent of guardian of \_\_\_\_\_, give my permission to the President of the Charlotte Concert Band; or his/her designee, to act as guardian in the event of an accident involving my child and I am not able to be contacted. Also, in the event of an emergency, he/she has my permission to consent to any attending physician to administer to my child any medications or perform any treatments that he/she deems necessary for the proper care and well-being of my child.

In consideration for the services performed by Charlotte Concert Band and the officers, members and agents of Charlotte Concert Band while facilitating the *Musician for a Lifetime* events, the aforementioned parties are herewith released from liability for all actions taken in good faith during the events.

**Student:** \_\_\_\_\_ **School:** \_\_\_\_\_

**Parent/Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian signature:** \_\_\_\_\_

**Please list any medications your child is taking or conditions of your child:**

## Photography Release

The Charlotte Concert Band sponsors the Musician for a Lifetime events in which students are may be photographed or videotaped. We are requesting to use these images on our website: [www.charlotteconcertband.org](http://www.charlotteconcertband.org) or in promotional publications, including the Charlotte Concert Band Facebook page. No last names will be used in these publications. If you would give such permission, please fill out the form below. Likewise, if you do not consent, we ask that you mark the appropriate statement below and return with the medical release form.

**Name:** \_\_\_\_\_

**School:** \_\_\_\_\_ **Band Director:** \_\_\_\_\_

I am the parent/legal guardian of the child above. I agree to the following:

\_\_\_ I **DO** give permission for my child's image to be used on film, videotape, or website as he or she participates in the Charlotte Concert Band Musician for a Lifetime events. No last names will appear on any materials.

\_\_\_ I **DO NOT** give permission for you to include my child's image on film, videotape, or website as he or she participates in Charlotte Concert Band Musician for a Lifetime events.

**Signature of parent/legal guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_