Music in Schools Initiative

The faculty and staff of Music in Schools Initiative are committed to ensuring an environment for all students that is safe, respectful, and conducive to learning and musical expression. The following list indicates unacceptable behaviors and their consequences. The student and a parent/guardian should read, discuss, and ensure that they understand all parts of this Code of Conduct before signing the LETTER OF AGREEMENT. If you have any questions, please contact Lead Teacher Rubén Rodríguez (ruben.rodriguez@yale.edu).

- **Failure to Practice/Prepare** – Students are expected to work hard throughout the program, and practice their music. An ongoing lack of preparation may require parent/guardian involvement and/or result in dismissal from the program.
- **Defacing School/University Property** – Immediate dismissal from the program.
- **Drug Use** – Immediate dismissal from the program.
- **Fighting** – Immediate dismissal from the program.
- **Stealing** – Immediate dismissal from the program.
- **Bullying** – Any behavior that is aggressive and involves unwanted negative actions, involves a pattern of behavior repeated over time, intimidates or demeans another student, and/or involves an imbalance of power or strength will result in immediate dismissal from the program.
- **Sexual Harassment** – Any such behavior deemed inappropriate by a faculty or staff member will result in immediate dismissal from the program.
- **Defiance toward Faculty or Staff** – Parent/guardian involvement required; may result in dismissal from the program.
- **Disruptive Behavior** – Parent/guardian involvement required; may result in dismissal from the program.
- **Vulgar Language** – Parent/guardian involvement required; may result in dismissal from the program.
- **Use of Electronic Devices** – The use of cell phones and other electronic devices is not permitted during the program for any reason. A student found using a cell phone or similar electronic device will have it confiscated until the end of the day. Parent/guardian involvement may be required; three cell phone confiscations will result in dismissal from the program.
- **Excessive Absences** – Students are expected to participate in the full length of the program. Three absences will result in dismissal from the program.
- **Excessive Late Arrivals (Tardiness)** – Students should arrive 10-15 minutes early for each rehearsal to prepare for a prompt start time. In the event of traffic or an emergency, the family should alert Rubén Rodríguez at 203-464-5790 before the rehearsal begins. Three unexcused late arrivals will result in dismissal from the program.
- **School Conduct** – Students are representing their schools, therefore being part of the ACHE is directly related to their in-school behavior and participation in school ensembles. Failing to remain in good academic standing with an excellent behavior record, or missing their school ensemble commitments, may result in dismissal from the program.
- **Other** – Other behavior deemed inappropriate by a faculty or staff member may require parent/guardian involvement and/or result in dismissal from the program.
Music in Schools Initiative

THE STUDENT and the PARENT/GUARDIAN should read, discuss, and ensure that they understand all parts of this agreement and the CODE OF CONDUCT before signing below. If you have any questions, please contact Lead Teacher Rubén Rodríguez (ruben.rodriguez@yale.edu).

By signing this document, you confirm that:

• THE STUDENT will participate fully in the Ensemble. THE STUDENT will attend each rehearsal and all concerts.

• THE STUDENT will conduct him/herself responsibly and work hard to improve his/her musicianship during the program.

• You have read and understood the CODE OF CONDUCT, and understand that THE STUDENT failing to abide by these rules may require PARENT/GUARDIAN involvement and/or result in dismissal from the program.

• You understand that student transportation will not be provided, and that THE PARENT/GUARDIAN is responsible for THE STUDENT’s transportation. Faculty and staff will not release THE STUDENT to a person other than those listed below unless THE PARENT/GUARDIAN submits a signed note in advance. Please check only one box:

☐ THE PARENT/GUARDIAN will pick up THE STUDENT promptly every day and does not permit him/her to leave the program by any other method.

☐ In addition to THE PARENT/GUARDIAN, THE STUDENT is permitted to be picked up by any of the family members or friends listed below:

_________________________  _________________________
Name                        Cell phone

_________________________  _________________________
Name                        Cell phone

_________________________  _________________________
Name                        Cell phone

☐ THE STUDENT is permitted to take the public bus home and knows the correct bus stop and schedule, or, THE STUDENT may walk or bike home on his/her own.

_________________________  _________________________
Student’s signature          Date

_________________________
Student’s name

_________________________  _________________________
Parent/Guardian’s signature  Date

_________________________
Parent/Guardian’s name

_________________________  _________________________
Parent/Guardian’s name      Cell phone
My child, _______________________ will participate in the Yale University Music in Schools Initiative programs. Music in Schools Initiative provides young musicians in New Haven with high level ensemble experiences in band, chorus, and orchestra. Students attend rehearsals, sectionals, chamber music classes, and play concerts, all free of charge. This document (“Agreement”) covers all aspects of my child’s participation in the Program. In this Agreement, “Yale” means Yale, its trustees, officers, employees, trainees, students, volunteers, and agents.

1. **Program Risks** – I understand that participation in the Program involves risks that Yale cannot eliminate, including, among others, risk of property damage, illness, bodily injury, permanent disability, and death.

2. **Assumption of Risk** – I voluntarily take responsibility for all risks of participating in the Program.

3. **Release** – In exchange for Yale allowing my child to participate in the All-City Honors Ensembles program, I release Yale from all legal and financial responsibility for any harm that I, my child, or our property might suffer as a result of my child’s participation, even if the harm is caused by Yale’s negligence.

4. **Indemnification** – I agree to indemnify and hold Yale harmless from (that is to say, I agree to pay or reimburse Yale for) any costs, penalties, legal fees, or judgments (“Costs”) that Yale has to pay related to my child’s participation in the Program, even if the Costs resulted from Yale’s negligence.

5. **Governing Law and Jurisdiction** – The laws of Connecticut shall govern and the courts of Connecticut shall interpret this Agreement.

6. **Binding Agreement** – This Agreement shall legally bind me, and my child, family members, spouse, estate, heirs, administrators, or personal representatives.

7. **Severability** – If a court decides that any part of this Agreement cannot be enforced, I agree to change that part to make it enforceable. If the unenforceable part cannot legally be changed, it will be severed, but the rest of the Agreement will remain in effect.

8. **Signature** – I agree that I have read and understood this Agreement, I am competent to sign it, and I do so voluntarily and without relying on anything Yale wrote or told me except what is written above.

Before you sign this Agreement, please read it carefully because it affects your legal rights.

Parent/Guardian’s signature __________________________ Date __________________________

Parent/Guardian’s name __________________________

Student’s name __________________________ Student’s Birth Date __________________________
It is mandatory that this medical form be completed fully so that appropriate emergency treatment can be provided during the program, if needed.

________________________________________________________________________
Student’s name

________________________________________________________________________
Health insurance carrier

________________________________________________________________________
Health insurance policy number

________________________________________________________________________
Preferred hospital

STUDENT’S HEALTH

________________________________________________________________________
Medications

________________________________________________________________________
Allergies or other health concerns

EMERGENCY CONTACT

________________________________________________________________________
Name

________________________________________________________________________
Cell phone ___________________________ Home phone ___________________________

________________________________________________________________________
Address

To whom it may concern: I authorize Yale University to provide appropriate emergency care to my child, should it be necessary to do so.

________________________________________________________________________
Parent/Guardian’s signature

________________________________________________________________________
Date
GRANT: For any and all performances, events, and activities sponsored by Yale University (Yale), and for consideration which I acknowledge, I irrevocably grant to Yale and Yale’s assigns, licensees and successors the right to record, photograph, publish, stream live, broadcast, distribute, exhibit, digitize, copyright, license, transfer with or without consideration, reproduce, edit, or otherwise use my name, biographical information, recorded voice, or video, photograph, likeness and/or performance in print, television, radio, electronic media and all other forms and media now known or hereafter invented. I agree that such use can be for any purpose at Yale’s discretion, including without limitation, education, trade or any commercial purpose throughout the world and in perpetuity. Yale is permitted, although not obligated, to include my name as a credit in connection with such use.

RELEASE: I release Yale and Yale’s assigns, licensees and successors from any claims that may arise regarding the use of my image, name, biographical information and/or voice including any claims of defamation, invasion of privacy, or infringement of moral rights, rights of publicity or copyright. I have no right of approval or inspection and no claim for compensation arising out of or in connection with, any use, alteration, or use in any composite form hereunder.

Yale is not obligated to utilize any of the rights granted in this Agreement.

I have read and understood the foregoing. This Agreement expresses the complete understanding of the parties.

__________________________________________  ________________
Student’s signature          Date

__________________________________________
Student’s name

__________________________________________
Main home address

__________________________________________
City, State, Postal code

PARENT/GUARDIAN CONSENT: I am the parent or guardian of the minor named above. I have the legal right to consent to and do consent to the terms and conditions of this release.

__________________________________________  ________________
Parent/Guardian’s signature          Date

__________________________________________
Parent/Guardian’s name
Music in Schools Initiative

Please select Yes or No to tell us if you give permission for Yale University & the Music in Schools Initiative to include your child in the following components of our program. While participation in Music in Schools Initiative programs is not dependent on answering yes to any of the following questions, these permissions are vitally important to the evaluation and long-term success of our programming.

Survey Release:
I give permission to allow my child to fill out surveys and participate in interviews to share his or her perceptions of the benefits and quality of Yale University & Music in Schools Initiative programs.

☐ Yes
☐ No

School Records Release:
I give permission to the Yale University & the Music in Schools Initiative program to obtain my child's school records (including but not limited to courses taken, grades, and test scores). This information will be used in conjunction with other survey data and will be maintained in electronic files with strict confidentiality.

☐ Yes
☐ No

Parent/Guardian’s signature

Date

Parent/Guardian’s name

Student’s name

Student’s Birth Date