

July 10, 2020



Welcome to the 2020 Bulldog Marching Band Season!! We want to remind you of several important dates coming up for our new season:

- 7/22 to 7/24 Music Camp – Please see July calendar for section specific times
- 7/27 to 7/31 Band Camp – 9 am to 4 pm for **ALL SECTIONS**
- Saturday, 8/1 Bridgeport Community Day Marching Band is performing in morning
More details and times to follow.

Due to the Coronavirus Outbreak, there will be several changes to this years' procedures as well as the "normal" schedule.

Kennywood - The most disappointing change is the cancellation of the Kennywood trip.
Kennywood Park has cancelled all of their Fall Fantasy Parades during August

Face coverings - **EVERY** student must bring their own face mask to **EVERY** rehearsal

Temperature checks - Student temperatures may need to be taken at the beginning of each rehearsal in order for each student to participate

Water containers – Students must bring **THEIR OWN** water container (preferably large and insulated).

Changes to schedule - All scheduled events and rehearsals are subject to change as new regulations and guidelines are enacted

NO ITEMS are to be shared among the students.

Please find enclosed:

- Marching Season Checklist
- 2020 Football Schedule
- Bridgeport Band Calendars for July and August
- Photo Release Form
- Emergency Medical Form

During music and band camp, the band boosters will be distributing uniforms. Photos will be taken near the end of Band Camp Week.

PLEASE BE PREPARED that your parent or guardian will need to sign off on the uniform pieces that you will receive.

If you have any questions or concerns about any of these items, please call our Booster President Erin Smith at 740-391-0439 or the Secretary Trish Funkhouser at 740-310-9295.

Let's have a great 2020 Bulldog Marching Band Season!! Go Dogs!

The Bridgeport Band Boosters

2020 Marching Season Checklist

UNIFORMS

For your summer uniform you will need to provide:

PLAIN black shoes

Black ankle socks

For your winter uniform you will need to provide:

TALL black crew socks

garment bag

MUSIC & BAND CAMP

For each day of music and band camp
you need to make sure to have:

A mask

A lyre for your instrument

A flip folder with at least 10 pages

Several sharpened pencils

A roll of fun colored/designed duct tape

A large insulated thermos of water

Sunscreen

A lunch – water will be provided

Bring 2 filled out forms:

Emergency Medical and Photo Release

*If payment for any of these items is an issue,
please let Ms. Zonders or a Booster Officer know
and we will try our best to resolve any issues.*

Bridgeport Marching Band Schedule July 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
28	29	30	1	2	3	4
					Independence Day (observed)	Independence Day
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
			Sectionals: (Indoor) - 8:00-9:15 – Percussion - 9:30-10:45 – Flutes - 11:00-12:15 – Clarinets - 1:00-2:15 – Sax + Horn - 2:30-3:45 – Trumpets - 4:00-5:15 – Low Brass	Sectionals: (Indoor) - 8:00-9:15 – Percussion - 9:30-10:45 – Flutes - 11:00-12:15 – Clarinets - 1:00-2:15 – Sax + Horn - 2:30-3:45 – Trumpets - 4:00-5:15 – Low Brass	Sectionals: (Indoor) - 8:00-9:15 – Percussion - 9:30-10:45 – Flutes - 11:00-12:15 – Clarinets - 1:00-2:15 – Sax + Horn - 2:30-3:45 – Trumpets - 4:00-5:15 – Low Brass	
26	27	28	29	30	31	1
	BAND CAMP: (Outdoor) 9am – 4pm	BAND CAMP: (Outdoor) 9am – 4pm	BAND CAMP: (Outdoor) 9am – 4pm	BAND CAMP: (Outdoor) 9am – 4pm	BAND CAMP: (Outdoor) 9am – 4pm	Community Day Event in the morning: Time TBA

Bridgeport Marching Band Schedule August 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
26	27	28	29	30	31	
	BAND CAMP (Outdoor) 9am – 4pm	BAND CAMP (Outdoor) 9am – 4pm	BAND CAMP (Outdoor) 9am – 4pm	BAND CAMP (Outdoor) 9am – 4pm	BAND CAMP (Outdoor) 9am – 4pm	Bridgeport Community Day: Marching Band Performance in morning
1	2	3	4	5	6	7
	Music/Marching Outdoor Rehearsal 4-6pm		Music/Marching Outdoor Rehearsal 4-6pm		Music/Marching Outdoor Rehearsal 4-6pm	
3	4	5	6	7	8	9
(Kennywood Performance – <u>CANCELED</u>)	Music/Marching Outdoor Rehearsal 4-6pm		Music/Marching Outdoor Rehearsal 4-6pm		Music/Marching Outdoor Rehearsal 4-6pm	
10	11	12	13	14	15	16
	Music/Marching Outdoor Rehearsal 4-6pm					
17	18	19	20	21	22	23
	Music/Marching Outdoor Rehearsal 4-6pm	Bulldog Pride Night 5:30 – 7pm (Marching Band Performance)		1 st Day of School MB Rehearsal 3-5pm		
24	25	26	27	28	29	30
		MB Rehearsal 3-5pm		MB Rehearsal 3-5pm		Football Game: AWAY Weirton Madonna 7pm
31	1	2	3	4	5	6
		MB Rehearsal 3-5pm		MB Rehearsal 3-5pm	Football Game: AWAY Monroe Central 7pm	



Student Photo Release Form

Student's Name: _____

Address: _____

City, State, Zip: _____

Parent's name: _____

Parent's Contact Phone Number: _____

I hereby grant to the Bridgeport Band Boosters the right to take my student's photograph. I hereby grant the Bridgeport Band Boosters the right to copyright, use and publish my student's picture and likeness in advertising and promotion for the Bridgeport High School Band in print and/or electronically without limitation on geographic territory.

I agree that the Bridgeport Band Boosters may use such photographs of my student with or without my name and for any lawful purpose, including for example such purposes at publicity, illustration, advertising and web content (including Facebook, Twitter and Instagram).

I agree that no advertisement or other material need be submitted to me or my student for approval and the Bridgeport Band Boosters shall be without liability to me or my student for any distortion or illusionary effect resulting from the publication of my student's picture or likeness.

Nothing herein will constitute any obligation upon the Bridgeport Band Boosters to make any use of the rights set forth herein.

I have read and understand the above:

Student's Signature: _____ Date: _____

Parent Signature: _____ Date: _____

**THE BRIDGEPORT SCHOOL DISTRICT
EMERGENCY MEDICAL AUTHORIZATION FORM**

Student I.D. _____ Date of Birth _____ Grade _____

Student Name _____
Address _____ City _____ State _____ Zip _____
Telephone () _____ Email Address: _____

The purpose of this form: To enable parents/guardians to authorize provision of emergency treatment for children who become ill or injured while under school authority when parents/guardians cannot be reached. Please list additional authorized (**Adult**) individuals on the back of this form: State Name, Relationship, and Telephone Number. Photo identification must be shown when signing out and picking up student.

Residential Parent or Guardian

Mothers Name	First Name	Last Name	Daytime Phone	Cell Phone
Fathers Name	First Name	Last Name	Daytime Phone	Cell Phone
Other's Name	First Name	Last Name	Daytime Phone	Cell Phone

Relative or Childcare Provider:

Name _____ Relationship _____
Address _____ Daytime Phone () _____
City _____ State _____ Zip _____

Part 1: To Grant Consent

I hereby give consent for the following medical care providers and local hospital to be called:

Physician		Phone Number	()
Dentist		Phone Number	()
Medical Specialist		Phone Number	()
Local Hospital		Emergency Room	()

In the event reasonable attempts to contact me have been unsuccessful, I hereby give my consent for: (1) the administration of any treatment deemed necessary by above named doctors, or, in the event the designated preferred practitioner is not available, by another licensed physician or dentist, and (2) transfer of the child to any hospital reasonably accessible.

This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentist, concurring in the necessity for such surgery, are obtained prior to the performance of such surgery.

Facts concerning the child's medical history, including allergies, medications being taken, and any physical impairment to which a physician should be alerted:

Date _____ Signature of Parent/Guardian _____
Address _____ Zip _____

Part II: Refusal to Consent

I do NOT give my consent for emergency medical treatment of my child. In the event of illness or injury requiring emergency treatment, I wish the school authorities to take the following action:

Date _____ Signature of Parent/Guardian _____
Address _____ Zip _____

	<u>Name</u>	<u>Relationship</u>	<u>Phone Number</u>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			
21.			
22.			
23.			
24.			

Bridgeport Athletics

55707 Industrial Drive, Bridgeport, OH 43912
Phone (740) 635-0853 · Fax (740) 635-6008



Thomas Daley, Principal

Greg Harkness, Athletic Director

VARSITY FOOTBALL 2020

Saturday	Aug. 29	WEIRTON MADONNA	Away	7:00	4:15
Friday	Sept. 4	MONROE CENTRAL	Away	7:00	4:15
Saturday	Sept. 12	FRONTIER #	Home	7:00	
Saturday	Sept. 19	PADEN CITY + #	Home	7:00	
Friday	Sept. 25	CONOTTON VALLEY	Away	7:00	4:00
Friday	Oct. 2	BEALLSVILLE	Away	7:00	4:00
Saturday	Oct. 10	TRINITY #	Home	7:00	
Saturday	Oct. 17	RIVER #	Home	7:00	
Friday	Oct. 23	SHADYSIDE @	Home	7:00	
Friday	Oct. 30	CAMERON	Away	7:00	4:30

+ *Homecoming Game*

@ *Senior Night*

Game Played at Martins Ferry's Football Field