

**MAKE MUSIC at
Woodland Middle School**

820 North Moseley Drive ~ Stockbridge, GA 30281



Dear future Woodland Middle School Students and Parents,

At this time, 5th grade students who will attend Woodland Middle School in August 2014 have the opportunity to enroll in one of the outstanding performing arts classes! Students may choose from **ONE** of the following: **Band**, **Chorus**, or **Orchestra**. There will be many wonderful opportunities at Woodland Middle School, but one of the *most exciting* and **rewarding** is membership in a **music** program! Students will be allowed to continue in their yearlong music class throughout middle school and will also be allowed to participate on the various sports teams during 7th and/or 8th grade, if they like. Being in a music class does *not* keep a student from being able to participate on the athletic teams. Music classes do not require any previous experience. Students do not already have to be able to read music. Don't miss out on this important opportunity to enroll your child now! There are some additional costs (uniforms, supplies, instrument rental) for students in music classes however, these are great investments!

If you have any additional questions or concerns, please feel free to contact us.

- Mrs. Davis, Band Director, Tina.Holmes-Davis@henry.k12.ga.us
- Ms. Miller, Chorus Director, Noelle.Miller@henry.k12.ga.us
- Mr. Lowder, Orchestra Director, Sam.Lowder@henry.k12.ga.us

If your child is interested in enrolling in Band, Chorus, or Orchestra at Woodland Middle School, please complete and return this enrollment form to your Elementary School Counselor or to the Woodland Middle School Counseling Department.

Sincerely,
The WMS Performing Arts Department

Woodland Middle School Performing Arts Enrollment Form 2014-2015

I am requesting my child to be enrolled in (students may enroll in *only ONE* music class):

_____ **BAND** _____ **CHORUS** _____ **ORCHESTRA**

Student Name _____ Current School _____

Address _____ Phone Number _____

_____ E-mail Address _____

Parent Signature _____ Date _____

Please return this form to your child's school counselor or to a WMS Counselor ASAP!!