



# THE JANNALI HIGH SCHOOL

Sutherland Road, Jannali NSW 2226  
T: (02) 9521 2805 F: (02) 9545 1175  
Email: [jannali-h.school@det.nsw.edu.au](mailto:jannali-h.school@det.nsw.edu.au)  
[www.jannali-h.schools.nsw.edu.au](http://www.jannali-h.schools.nsw.edu.au)

Dear Parents and Caregivers

We are very excited to invite your child to join The Jannali High School Concert Band.

The TJHS Concert Band program is dedicated to providing students with a variety of learning opportunities for those who are interested in developing their musical education beyond the classroom. Conducted by the very experienced Mark Brown, the students and school community have been working extremely hard to develop a Concert Band with musicality, flair and an appreciation for a variety of musical styles.

### How it works:

**Rehearsals are on Monday and Wednesday mornings, starting promptly at 7:30am.**

- Monday's rehearsal runs until morning assembly (8:38am)
- Wednesday's rehearsal runs until first period (8:56am)

Students of the band will be placed in the band roll call, therefore on rehearsal days the roll can be easily marked and not disrupt practice. This time will also be utilised to communicate information of upcoming performances, new repertoires and any day to day band news.

**Band fees are \$130 per term, per student.** This covers the cost of the conductor's wages, instrument maintenance and repair, sheet music and Band Association fees.

We are looking forward to an exciting year, and can't wait to watch The Jannali High School Concert Band continue to develop and grow. We greatly encourage all students who are interested, regardless of any past musical experience or not, to join the band and begin their musical journey at The Jannali High School.

Kind Regards

George Haman  
(TJHS Band Coordinator)

# EXPRESSION OF INTEREST – TJHS CONCERT BAND

I give \_\_\_\_\_ permission to join the TJHS Concert Band.

Instrument (this can include any past experience): \_\_\_\_\_

Medical Requirements: \_\_\_\_\_

Parent/caregiver signature: \_\_\_\_\_

**Please print this form and return this form to Mr Haman in the CAPA staffroom**