

Brownsburg Middle School Performing Arts

King's Island Reward Trip – Saturday, May 16, 2026

Dear Parents and Students,

We are excited to announce that our 7th grade **Band, Choir, and Orchestra students** will once again celebrate a fantastic year of music with our annual **Reward Trip to Kings Island!**

Students are eligible if they:

- Have **no unexcused absences** from performances
- Have **no more than 2 office referrals**
- Meet all normal **BEMS & BWMS eligibility requirements**

Trip Details

- **Date:** Saturday, May 16th
- **Departure:** 7:00 AM from BEMS (bus lot near the gyms and Door 7)
- **Return:** Approximately 11:45 PM (BEMS parking lot) (Students will text/call when we are 30 minutes away.)
- **Park Time:** Approximately 10:00 AM – 9:00 PM

All participating students *must ride their designated bus to and from the park and remain in the park the entire day.*

Fee: \$106 (Cash or Check. Make checks payable to BMS Sound Boosters Inc.

- Transportation (The Free Enterprise System): \$66
 - Park Admission: \$40
- Band and orchestra students may apply their **fundraising credits** toward part or all of the trip fee. Please indicate totals on your registration.

Important:

- **Registration must be complete.** Incomplete registrations will be returned to the student/family, along with payment.
- **Parents:** You are invited to chaperone on a first-come, first-served basis. See registration page.
- **Kings Island is completely cashless.** Students must bring a **prepaid debit card for food and souvenirs.**
- Fast passes and meal plans are available directly through Kings Island. Directors will **not** be responsible for planning or purchasing special plans. Families are responsible for making those arrangements if desired.

What to Bring

- Prepaid debit card
- Jacket or sweatshirt (it can get cool in the evening)
- A snack for the bus ride (NO items containing nuts)
- Cell phones or personal listening devices (optional.)

Please note:

- Students are responsible for their own personal items.
- The bus will NOT be secure while we are in the park.
- Lockers are available inside the park if desired.

Dress & Expectations

- **School dress code applies.**
- We go rain or shine — **NO REFUNDS** if it rains.
- Students must follow all school and park rules.

Any student unable to follow expectations will be dealt with firmly, and parents will be notified of major offenses.



This is a wonderful opportunity for our music students to celebrate their achievements, build friendships, and make lasting memories together. We are so proud of their hard work this year and look forward to an amazing day of fun!

Band

cbrinkman@brownsburg.k12.in.us
ccummings@brownsburg.k12.in.us
trunyon@brownsburg.k12.in.us
jvann@brownsburg.k12.in.us

Choir

kdiener@brownsburg.k12.in.us
tfowler@brownsburg.k12.in.us
mheitkamp@brownsburg.k12.in.us
apena@brownsburg.k12.in.us

Orchestra

lcrawford@brownsburg.k12.in.us
kmcdaniel@brownsburg.k12.in.us

Brownsburg Middle School Performing Arts: Kings Island Registration

Return to student's Performing Arts teacher by Wednesday, April 8, 2026

Student Information REQUIRED

I give permission for **Student Name:** _____ to travel with the BMS Performing Arts to King's Island (Mason, Ohio) on Saturday, May 16, 2026.

Participants must ride the designated bus to and from King's Island and remain in the park the entire day.

I understand the cost is \$106.00 (payable to BMS Sound Boosters Inc.) and that payment is attached (clip/bag)

Program (circle one): Band Choir Orchestra

School (circle one): East West

Parent/Guardian Signature: _____

Medical Release Form REQUIRED

I give permission for my student, **Student Name:** _____ to receive necessary medical treatment while on the Brownsburg Middle Schools Performing Arts trip.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Contact Information REQUIRED

Parent Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Student Information

Student Cell Phone (if bringing one): _____ Student Date of Birth: _____

Emergency Contact (Other than Parent) REQUIRED

Name: _____ Phone: _____

Insurance Information REQUIRED

Insurance Company: _____ Insurance Number: _____

Important Medical Information REQUIRED

List any medications that need to be taken during the day. A medical release form must be on file with the school nurse and the medication in her possession no later than Thursday, May 7, 2026. If none, please write "none" or "n/a".

Chaperone Information (Complete ONLY if planning to chaperone)

If you would like to chaperone, please include \$66.00 with your child's payment.

Chaperone Full Name: _____ Chaperone Date of Birth: _____

Chaperone Cell Phone Number: _____ Chaperone Email Address: _____
