



# Bismarck Mandan Symphony Youth Orchestra

## Policy Agreement 2022-2023

I, \_\_\_\_\_ have read and agree to abide by the policies of Bismarck Mandan Symphony Youth Orchestra.

\_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Student Name

\_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Parent Signature