**![C:\Users\rameyt\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\8YTM7RZE\music-notes[1].jpg]() Music at Hatfield 2023-24** ![C:\Users\rameyt\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\8YTM7RZE\music-notes[1].jpg]()

Your child will have Music class one morning a week, for 45 minutes.

Kindergarten Music meets 12:05-12:50

Grade2 Music meets 1:00-1:45

Grade 2 Music meets 1:55-2:40 (Car riders dismissed at 2:35)

I will be at Burris in the morning and Hatfield in the afternoon.

**Music Programs at Hatfield**

**Grade 1: “Winter Fantasy”**

**Concert for Burris School on December 14, at 9:00a.m.**

**Concert for Parents & Community on December 14, at 5:30p.m.**

**Grade 2: “Winter Fantasy”**

**Concert for Burris School on December 14, at 9:00 a.m.**

**Concert for Parents & Community on December 14, at 7:00p.m.**

**Mrs. Nicholson’s Classroom Website: rameytmusic.com**

Audios, practice videos & permission forms for each concert will be available on the website.

Each 1st & 2nd grade student will be given lyric sheets to help them practice for the concert. In addition, practice CD’s will be given to those who do not have internet where they live.

Students will learn and practice these songs in the music classroom starting in September.

Students should try to memorize all of the songs before the concert.

![C:\Users\rameyt\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\HG2AYM72\famous_smileys__thumbsup____by_mondspeer-d8hsw7h[1].png]()If you are interested in helping out in the Music room, please fill out the form below,

detach and return to me. I’ll be in touch!

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If you are interested in helping this school year, put a check next to the committee(s) you want.

\_\_\_\_\_Concert Decorating Committee \_\_\_\_\_Stage Set-Up & Tear Down Committee \_\_\_\_\_Video Committee

Student Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Classroom Teacher’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Adult Family Member(s) interested in helping:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Phone Number(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_