

## ST. OLAF SUMMER MUSIC CAMP 2012 Registration

For all electronic payments (credit card, echeck or ACH bank transfer), register securely online.

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Nickname (for name badge) \_\_\_\_\_

Street Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Roommate requested (one only and roommates need to request each other) \_\_\_\_\_

Gender:  male  female Date of Birth: \_\_\_/\_\_\_/\_\_\_ T shirt size (adult):  S  M  L  XL  XXL

High School \_\_\_\_\_ High School graduation year \_\_\_\_\_

Have you attended St. Olaf Music Camp in the past? Y N

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### Music Camp Ensemble, Lessons and Class Registration

**Major Ensemble Selection:** Select one or two ensembles and be sure to list your instrument or voice part. *Orchestra winds and percussion are by audition only.*

Orchestra: instrument (no piano) \_\_\_\_\_

Band: instrument (no piano) \_\_\_\_\_

Choir: voice part \_\_\_\_\_

**Optional choir music purchase (\$10):** Campers will check out St. Olaf music OR can purchase their choir music, which MUST be pre-ordered on the Fess and Payments section of this form.

**Instruments:** St. Olaf is able to provide instruments if you cannot bring yours. Please indicate what instrument, if any, you will need. (percussionists must bring their own sticks and mallets): \_\_\_\_\_

**Private lessons:** Select any instrument, voice for your lesson package. Two half-hour lessons are included in your tuition. A second, optional, package is available for a \$60 fee.

**Lesson package included:**  voice  instrument \_\_\_\_\_

**Optional lesson package:** (\$60):  voice  instrument \_\_\_\_\_

**Daily Classes:** Choose five classes you would like to take and rank them according to your preference (1-best). You will be enrolled in two to three classes, depending on your major ensemble participation. Every effort will be made to give those who register prior to May 1 their first and second choices.

Chamber Music/Brass: what instrument will you play? \_\_\_\_\_

Chamber Music/String: what instrument will you play? \_\_\_\_\_

Chamber Music/Woodwind: what instrument will you play? \_\_\_\_\_

Ear Training

Music Theory

Rhythm Workshop

Conducting Basics

Jazz Improvisation: what instrument will you play? \_\_\_\_\_

Gospel Choir

Musical Theatre Workshop

Handbells  experienced  not experienced

Songwriting

Nuts and Bolt in Your Musical Toolbox

**FEES AND PAYMENTS: check one box only, and check all circles that apply**

<input type="checkbox"/>	Music Camp residential campers: postmarked prior to May 1	\$ 595	_____
<input type="radio"/>	Optional Lesson Package	\$ 60	_____
<input type="radio"/>	Late charge for registrations received after May 1	\$ 50	_____
<input type="radio"/>	Choir music packet	\$10	_____
___	Number final concert CDs (Final concert features band, choir and orchestra \$12/ea)	\$	_____
<b>Total Due</b>			\$ _____

**Payment**

Pay the full amount now or send a check for the \$100 non-refundable deposit with balance due on May 1.

**Make checks payable to St. Olaf College and mail to:**

St. Olaf Music Camp, St. Olaf College, 1520 St. Olaf Avenue, Northfield, MN 55057-1098

**Or:** Register securely on-line at [www.stolaf.edu/camps](http://www.stolaf.edu/camps)

**Refund policy:** Written cancellations received prior to May 1 will receive a refund less the \$100 non-refundable deposit. No refunds will be made after May 1.

**PARENT WAIVER**

As the parent or guardian of the minor listed above, I consent to his/her participation in the St. Olaf Summer Music Camp. I understand and agree as follows:

1. My child/ward is healthy and able to fully participate in all camp activities.
2. My child/ward has sufficient health insurance to cover her/him during her/his participation in the program.
3. I understand that St. Olaf College does not provide insurance for program participants.
4. I hereby release all pictures of my minor child taken by St. Olaf College for promotional purposes and programming materials including the college website. Child will not be identified by name.
5. I hereby release and discharge St. Olaf College and its regents, officers, employees, agents, successors and assigns, on behalf of myself and my legal representatives, heirs, successors, and assigns, from any and all claims, liabilities, and costs which I or any of my legal representatives, heirs, successors, and assigns may have claim to have relating to, or arising from my child/ward's injury, illness, or death.
6. I agree to indemnify, defend, and hold harmless St. Olaf College and its regents, officers, employees, agents, successors, and assigns, from any and all claims, liabilities, and costs asserted by or on behalf of my child/ward or any of my child/ward's legal representatives, heirs, successors, and assigns, relating to or arising from my child/ward's participation in the program, including and without limitation to my child/ward's injury, illness, and death.

Please tell us if your child has any medical condition, including possible reactions to prescription medication or allergies that we should be aware of:

**Emergency Contact information**

Name and relationship to camper: \_\_\_\_\_

Phone 1: \_\_\_\_\_ Phone 2: \_\_\_\_\_

Alternative Name and relationship to camper: \_\_\_\_\_

Phone 1: \_\_\_\_\_ Phone 2: \_\_\_\_\_

Insurance Provider \_\_\_\_\_ Policy Number \_\_\_\_\_ Insurance Provider Phone \_\_\_\_\_

This waiver will be governed by the laws of the State of Minnesota. I have read this waiver carefully and I understand and agree to be bound by the provisions herein.

Signed \_\_\_\_\_

Date \_\_\_\_\_