

McMurry University Band and Drum Major Camp July 7-12, 2019

Check-in and Auditions:

Sunday, July 7 (1:00-3:00 pm)
Bynum Band Hall

Exhibition Concert:

Friday, July 12 (12:00 noon)
Radford Auditorium

REGISTRATION OPTIONS
Online at www.mcmbandcamps.com

OR

By mail with this application
Mail to and make check or money order payable to:

*McMurry University Music Camps
1 McMurry University #575
Abilene, TX 79697*

CAMP COSTS

- Overnight Camp (dorm & all meals included) \$375.00
- Day Camp (lunch included) \$225.00
- Add Breakfast to Day Camp \$30.00
- Add Dinner to Day Camp \$35.00
- Late Fee (if submitted after June 21) \$20.00

Amount Due _____

Amount Enclosed (\$99 deposit minimum) - _____

Amount Due at Check-in _____

All applications received after Friday, June 21 are subject to a \$20 late fee. It is the parent/guardian's responsibility to coordinate with directors regarding the submission of camp applications for large school groups. Confusion in this regard will not exempt late applicants from paying the late fee. See our website for our cancellation/refund policy.

*If your student is receiving scholarship assistance from his/her band program or other sources, please list the scholarship source and contact information below:

Questions? Contact our camp office at (325) 793-3837 or through the online form at www.mcmbandcamps.com

McMurry Summer Music Camps Application

Please print neatly in blue or black ink

Camper's Name: _____

Address: _____

City: _____ St: _____ Zip: _____

Home Phone: _____ Grade next year: _____

Date of Birth: ____/____/____ Gender: _____

Student email: _____

School Last Year: _____

Band Director Last Year: _____

Concert Instrument*: _____

**Please specify TC/BC for Baritone & Alto/Tenori/Bari for Saxophone*

Shirt Size (adult): S M L XL XXL XXXL

EMERGENCY CONTACT INFORMATION

Parent/Guardian Name(s): _____

Parent Email: _____

Daytime Phone: _____

Evening Phone: _____

If parent/guardian is unavailable in emergency, contact:

Name: _____

Daytime Phone: _____

Evening Phone: _____

HEALTH INSURANCE INFORMATION (REQUIRED)

Name of Insured: _____

Insurance Company: _____

Address: _____

Phone: _____

Policy # / Group #: _____

My child has permission to take Tylenol or Ibuprofen? Y N

Please list any medical conditions, including allergies to food or medication, as well as any prescription medications the student need to take at camp (to remain confidential):

Swimming will be offered as a recreational activity. Certified lifeguards will be provided. Only students with parent/guardian permission will be allowed to swim.

This camper: ____ is ____ is NOT allowed to swim.

HOUSING

Camper will be staying: ____ ON campus ____ OFF campus

If ON campus, preferred roommate: _____

ELECTIVE CHOICES

Please select your top three choices of electives in order of preference by using "1", "2", and "3". Campers will be assigned to two different elective courses. Elective preferences will be honored in order of receipt of application and based on availability and course enrollment caps. Those attending for drum major camp check the first box only.

Descriptions of camp electives can be found online at:
www.mcmbandcamps.com

Drum Major Camp	
<input type="checkbox"/> I'm participating in Drum Major Camp (no electives)	
Band Camp	
<input type="checkbox"/> Music Theory	<input type="checkbox"/> Vocal Techniques
<input type="checkbox"/> Chamber Music	<input type="checkbox"/> The Science of Music
<input type="checkbox"/> Music Appreciation	<input type="checkbox"/> Leadership Fundamentals
<input type="checkbox"/> Sightreading	<input type="checkbox"/> Future Music Educators
<input type="checkbox"/> Conducting	<input type="checkbox"/> Marching Band Techniques
<input type="checkbox"/> Jazz Band**	<input type="checkbox"/> World Percussion

***This elective is only open to HS students and is by audition only.*

CAMP AGREEMENT

I understand and agree to the following: I verify that all information contained herein is complete and accurate. Students must adhere to all rules stated in the general information packet. Camp participation for the full week is required. Students are expected to attend all scheduled activities each day of the camp. Special situations can be brought to the attention of the Camp Director or other authorized personnel as necessary, and exceptions *may* be granted at the discretion of the Camp Director on a case-by-case basis. In case of accident or sudden illness to the aforementioned child, and in the event that I cannot be reached by telephone, I hereby authorize a representative of the McMurry University Summer Music Camps to refer the child to McMurry Health Personnel or authorized hospital emergency room physician. I hold the McMurry Summer Music Camps, its employees, and McMurry University harmless from all liability resulting from any accidents or illness to my child. Express permission is granted for use of photo and video imagery, as well as audio of the camper's musical performances, for camp CD, video, and other promotional purposes. Students who do not complete the McMurry Summer Music Camps for disciplinary or health reasons are not entitled to a refund of any camp fees paid. I have read and understand all information contained herein.

Parent/Guardian Name Parent/Guardian Signature

Camper Name Camper Signature