



## 2022 Javelina Marching Camp

The **TEXAS A&M UNIVERSITY-KINGSVILLE JAVELINA MARCHING CAMP** provides high quality instruction to high school students and an opportunity to improve their skills in many disciplines of the marching arts. Instruction is offered for drum majors, color guard, drum line, front ensemble, all wind instruments, and leadership. The camp runs from Sunday, June 19 through Friday, June 24.

Campers also participate in one of several electives, including concert band, jazz band/combo, chamber ensembles, improvisation, conducting, and many more.

### CAMP FEES AND DEPOSIT

<b>Complete Application</b>	<b>Resident</b>	<b>Commuter</b>	<b>All-State Participant</b>
April 1 - June 1	\$400	\$250	\$200 (res) 125 (com)
Registration On/After June 2	\$450	\$300	\$225 (res) 150 (com)

- **RESIDENT** Includes tuition, room, three meals a day, and all activities.
- **COMMUTER** Includes tuition, one meal a day, and all activities.
- **ALL-STATE** Includes tuition, room, three meals a day, and all activities.  
*All-state campers are those who have been selected for and participated an all-state ensemble and are offered a half-tuition scholarship for the camp. A verification letter from their band director must accompany the application.*
  
- **PRIVATE LESSON FEE (optional)** \$30.00 per lesson  
*Lesson fee must be paid at the start of the camp during check in and are contingent on instructor availability.*
  
- **APPLICATION DEPOSIT:** If the full camp tuition is not being paid on Marketplace (link available at [tamukbandcamps.com](http://tamukbandcamps.com)), a \$100.00 is due with the application. **This is inclusive of the total cost.** For example, a \$100 deposit for a resident camper's tuition would leave only \$300 left if registered by June 1. The balance of fees is due upon by check-in. Payments may be made toward the total fee anytime prior to registration. **If you wish to pay the full amount by credit card or electronic check, use the online option through Marketplace.** There is no fee to use this service.

## 2022 APPLICATION INSTRUCTIONS

We have a limited number of spaces available (150) for on-campus resident campers. There is no cap on off-campus commuter campers. To officially reserve your spot in the camp, we must receive the following in the music department office:

- **Camper Application** (completed and signed)
- **Participant Waiver CAF 7**
- **Minimum \$100 Deposit Payment or credit card payment in full via Marketplace**  
(Please keep in mind we have many applications to process. Your payment may be received, but not go through right away.)

We will respond with confirmation of receipt of materials and instructions on how to pay in full if you have not already done so. Payment may be made by check, cash, money order, or online through Marketplace. If paying through Marketplace, you must pay the entire camp tuition in full. Online payment through Marketplace does not reserve a spot at the camp, only receipt of the application, CAF 7 waiver, and deposit together.

**Application, CAF 7 waiver, and deposit may be submitted to the camp office by uploading documents via [OneDrive](#) (preferred), by e-mail to [elizabeth.janzen@tamuk.edu](mailto:elizabeth.janzen@tamuk.edu), mail, or in person.**

Mailing address:

TAMUK SUMMER BAND CAMP  
Attn: Sheri Borchardt  
School of Music  
700 University Blvd., MSC 174  
Kingsville, TX 78363-8202

Physical address:

Music Education Building, Room 100  
775 N Armstrong St  
Kingsville, TX 78363

**Please make sure that all forms are COMPLETELY filled out. This includes medical information, insurance information, and parent/participant signatures. Indicate “N/A” if applicable (no insurance, no medicines, etc). Failure to do so will result in an incomplete application.**

Refunds requested prior to June 12 are eligible to receive a refund on tuition paid, minus the \$100 deposit that is included in the price of the camp. Refunds will not be possible if requested on, or after June 12.

If you have any questions please e-mail us at [sheri.borchardt@tamuk.edu](mailto:sheri.borchardt@tamuk.edu), or call (361) 593-2803.

Feel free to check out our website [tamukbandcamps.com](http://tamukbandcamps.com)! Our website has a campus map, FAQ's, camp schedule, and many more great resources for you and your camper!

## INFORMATION

- **REGISTRATION:** Registration for the Javelina Marching Camp is at Martin Hall on Sunday, June 19, 2022, from 1:00-3:30 pm. Go to [tamukbandcamps.com](http://tamukbandcamps.com)
- **INSTRUMENTS AND EQUIPMENT:** Campers students must provide their own instruments with the exception of percussion; however, percussionists must bring their own sticks and mallets. A complete list of required equipment for all campers can be found in the FAQs on [tamukbandcamps.com](http://tamukbandcamps.com).
- **FACULTY:** The most outstanding band directors, university faculty, and private teachers from throughout South Texas provide valuable knowledge and teaching in an intense week of learning and fun.
- **CONCERTS:** All campers participate in the closing concert at 3:00 pm on Friday. Campers may depart at the conclusion of their band's concert.
- **REFUNDS:** A refund of fees paid less a \$100.00 processing/application fee will be granted if written notice to withdraw application is received **before** June 12, 2022.
- **DORMITORIES:** Campers are housed in modern air-conditioned dorms, 2 campers per room. Girls and boys are housed in separate towers of Martin Hall.
- **ACTIVITIES:** All resident campers participate in nightly activities. Activities may include:  
*Camp Olympics, Skit & Talent Night, Dance Night, Jazz Night, Movie Night*
- **MEALS AND FOOD SERVICE:** Meals are provided by Aramark Food Services. Food is served at campus cafeterias by the professional food staff. A wrist band provided at camp check-in serves as the meal ticket during their stay.
- **COUNSELORS:** A counseling staff of Texas A&M University-Kingsville music students provides careful supervision to all portions of a camper's experience while at camp. The counselors are with the students all day and evening, and they are assigned to dorm rooms at night.
- **HEALTH CARE:** A band camp nurse is employed by the university to provide first aid and emergency care for the campers. **The nurse must have written instruction from the camper's doctor in order to administer any medication or injections. These must be medications that the student brings with them, as the nurse will not have medications to dispense upon request at the nurse's station. The nurse will be on-site during registration.**
- **CANCELLATION POLICY:** Should the camp be cancelled for any reason, campers will receive a prorated discount based on the number of days the camp was in session, minus the \$100.00 deposit. For example, if the camp is cancelled after two full days, campers will receive a 60% discount of the total fee minus deposit. Camp cancellation is at the discretion of the camp directors and/or the university. In case of cancellation, each camper's parent or guardian must fill out the proper paperwork for the refund, including a W-9 tax form and valid social security number. No refunds can be issued without this information. All payments must be made from the same source to ensure a full refund should the camp be cancelled.

**\*\*\* FAILURE TO RECEIVE FULL PAYMENT BY THE SECOND DAY OF THE CAMP MAY RESULT IN NOT BEING ABLE TO PARTICIPATE IN CAMP\*\*\***

# TEXAS A&M UNIVERSITY-KINGSVILLE JAVELINA MARCHING CAMP APPLICATION

June 19-24, 2022

Application may be submitted to the camp office by uploading documents via [OneDrive](#) (preferred)  
or by e-mail to [elizabeth.janzen@tamuk.edu](mailto:elizabeth.janzen@tamuk.edu)

Name the file *Last Name, First Name Camp Application*

*This form must be completely filled out. Write N/A if no answer. The application will be considered incomplete if there are empty blanks.*

## Camper Information

Camper Name \_\_\_\_\_ (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (MI) Shirt Size \_\_\_\_\_ Gender \_\_\_\_\_ Age \_\_\_\_\_

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

Mailing Address \_\_\_\_\_

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

Home phone \_\_\_\_\_ Parent/Guardian's daytime phone \_\_\_\_\_

Camper Type: (Please circle one)     **Resident** (Staying ON Campus)     **Commuter** (Staying OFF Campus)

If staying on campus, do you have a roommate preference? (optional) \_\_\_\_\_  
Last name                                  First name

## Medical Information

*The medications listed below must be medications that the student brings with them, as the nurse will not have medications to dispense upon request at the nurse's station.*

Insurance Company \_\_\_\_\_ Policy Number: \_\_\_\_\_

Which medications are you currently taking? (Please list both over the counter and prescription.)

Medicine name \_\_\_\_\_ Dose \_\_\_\_\_ Reason \_\_\_\_\_ How long have you been taking this medication? \_\_\_\_\_

Medicine name \_\_\_\_\_ Dose \_\_\_\_\_ Reason \_\_\_\_\_ How long have you been taking this medication? \_\_\_\_\_

Medicine name \_\_\_\_\_ Dose \_\_\_\_\_ Reason \_\_\_\_\_ How long have you been taking this medication? \_\_\_\_\_

Are there any medical conditions your child has that we should be aware of? Please explain.

\_\_\_\_\_  
\_\_\_\_\_





**PARTICIPANT WAIVER, INDEMNIFICATION, AND  
MEDICAL TREATMENT AUTHORIZATION FORM**

1. EXCULPATORY CLAUSE. In consideration for receiving permission to participate in any and all activities of **TAMUK Marching Band Camp, June 19-24 2022**, (herein referred to as "activity"), which is sponsored by the **TAMUK School of Music** at Texas A&M University-Kingsville (herein referred to as "sponsor"), a member of The Texas A&M University System, I hereby release, waive, discharge, covenant not to sue, and agree to hold harmless for any and all purposes sponsor, The Texas A&M University System, the Board of Regents for The Texas A&M University System, and their members, officers, servants, agents, volunteers, or employees (herein referred to as RELEASEES or INDEMNITEES) from any and all liabilities, claims, demands, injuries (including death), or damages, including court costs and attorney's fees and expenses, that may be sustained by me while participating in such activity, while traveling to and from the activity, or while on the premises owned or leased by RELEASEES, **including injuries sustained as a result of the sole, joint, or concurrent negligence, negligence per se, statutory fault, or strict liability of RELEASEES.** I understand this waiver does not apply to injuries caused by intentional or grossly negligent conduct.

2. INDEMNITY CLAUSE. I am fully aware that there are inherent risks to myself and others involved with this activity, including but not limited to **TAMUK Marching Band Camp**, and I choose to voluntarily participate in said activity with full knowledge that the activity may be hazardous to me and my property, and to the person and property of others. I acknowledge there may be physically strenuous activities. I know of no medical reason why I should not participate. **I agree to indemnify and hold harmless INDEMNITEES** from any and all liabilities, claims, demands, injuries (including death), or damages, including court costs and attorney's fees and expenses, which may occur to myself, other participants, and third-persons as a result of my participation in said activity, **including injuries sustained as a result of the sole, joint, or concurrent negligence, negligence per se, statutory fault, or strict liability of INDEMNITEES.**

3. NO INSURANCE. I understand that RELEASEES do not maintain any insurance policy covering any circumstance arising from my participation in this activity or any event related to that participation. As such, I am aware that I should review my personal insurance coverage. Sponsor does not carry general liability insurance to cover claims arising from this activity so it seeks a waiver of claims as additional consideration for the right to participate so sponsor, a governmental unit of the State of Texas, can (a) provide the activity at the lowest possible cost to participants; and (b) provide access to a greater number of participants by expending limited resources on program materials rather than on liability insurance.

4. BINDS HEIRS. It is my express intent that this agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representatives, if I am deceased, and shall be governed by the laws of the State of Texas.

5. MEDICAL AUTHORIZATION, INDEMNITY FOR MEDICAL EXPENSES, and WAIVER. I understand RELEASEES cannot be expected to control all of the risks articulated in this form and RELEASEES may need to respond to accidents and potential emergency situations. Therefore, I hereby give my consent for any medical treatment that may be required, as determined by a medical professional at the medical facility, during my participation in this activity with the understanding that the cost of any such treatment will be my responsibility. I agree to indemnify and hold harmless INDEMNITEES for any costs incurred to treat me, even if an INDEMNITEE has signed hospital documentation promising to pay for the treatment due to my inability to sign the documentation. I further agree to release, waive, discharge, covenant not to sue, and agree to hold harmless for any and all purposes, RELEASEES from any and all liabilities, claims, demands, injuries (including death), or damages, including court costs and attorney's fees and expenses, that may be sustained by me while receiving medical care or in deciding to seek medical care, including while traveling to and from a medical care facility, **including injuries sustained as a result of the sole, joint, or concurrent negligence, negligence per se, statutory fault, or strict liability of RELEASEES.** I understand this waiver does not apply to injuries caused by intentional or grossly negligent conduct.

6. VOLUNTARY SIGNATURE. In signing this agreement I acknowledge and represent that I have read it, understand it, and sign it voluntarily as my own free act and deed; sponsor has not made and I have not relied on any oral representations, statements, or inducements apart from the terms contained in this agreement. I execute this document for full, adequate and complete consideration fully intending to be bound by the same, now and in the future. **I understand I can choose not to sign this document and free myself from its terms and the associated risks of the activity by simply not participating in the activity and choosing some other activity available to me that has a lower level of risk to me. I further understand this is a voluntary, extracurricular activity; therefore it is not required for me to obtain college credits and not participating in this activity will in no way hinder my ability to obtain a degree from the university.** [For fieldtrips or other class-related activities, substitute: I understand participation in this class/fieldtrip/activity is not mandatory and I will not be penalized for failing to participate in this activity because an alternative activity exists for which I can receive like credit. While I understand alternative activities are available to me that do not have the risks associated with this activity I still desire to voluntarily engage in this activity.]

**SIGNING THIS DOCUMENT INVOLVES THE WAIVER OF VALUABLE LEGAL RIGHTS.  
CONSULT YOUR ATTORNEY BEFORE SIGNING THIS DOCUMENT.**

**SIGNED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

**Participant Signature:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**Participant's Date of Birth:** \_\_\_\_\_

**Parent or Legal Guardian Signature:** \_\_\_\_\_  
(If Participant is under 18 years old)

**Parent or Legal Guardian Printed Name:** \_\_\_\_\_  
(If Participant is under 18 years old)

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**EMERGENCY CONTACT INFORMATION:**

Name: \_\_\_\_\_ Relationship \_\_\_\_\_

Home Address: \_\_\_\_\_

Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_  
Phone # Phone # Phone #

Name: \_\_\_\_\_ Relationship \_\_\_\_\_

Home Address: \_\_\_\_\_

Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_  
Phone # Phone # Phone #