



TEXAS A&M
UNIVERSITY
KINGSVILLE

2019 Summer Band Camp

The **TEXAS A&M UNIVERSITY-KINGSVILLE SUMMER BAND CAMP** provides high quality instruction to middle and high school students. The camp runs from Sunday, June 16 through Friday, June 21. New this year is a drum major intensive track within the camp, which is designed to help interested students develop critical leadership skills.

Summer band campers participate in one of several concert bands, based on the student’s ability on their instruments and may elect to perform in jazz bands, chamber ensembles, and percussion ensembles. Students also take electives offered at the camp including rock & roll history, musicianship class, music theory, and conducting.

CAMP FEES AND DEPOSIT

Complete Application	Resident	Commuter	All-State Participant
April 1 - June 7	\$400	\$250	\$320(res) 200 (com)
On-Site Registration June 16	\$450	\$300	\$360(res) 240 (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.
- **PRIVATE LESSON FEE (optional)** \$30.00 per lesson
- **APPLICATION DEPOSIT:** \$100.00. This deposit *must* accompany the application. (**This is inclusive of the total cost**). The balance of fees is due upon registration. 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.** This can be found at tamukbandcamps.com. There is no fee to use this service.

2019 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** (included below)
- **Minimum \$100 Deposit Payment** (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 mail, fax, e-mail, or in person.

Mailing address:

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

Fax: (361) 593-2816 (please include a cover page)

E-mail: sheri.borchardt@tamuk.edu

Physical address:

Bellamah Music Building, Room 112
905 Engineering Ave
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).

Refunds requested prior to June 8 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 8.

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

Feel free to check out our website 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 Summer Band Camp is at Turner-Bishop Hall on Sunday, June 16, 2019, beginning at 2:00 pm. Go to tamukbandcamps.com
- **BANDS:** Students audition for ensembles on the first afternoon of camp and are placed into groups based on ability and achievement. Students may play All-State Etudes, etudes from method books, or any short piece of music that displays their best playing. Ensembles may include concert bands, jazz bands, mariachi, and instrumental ensembles.
- **INSTRUMENTS AND EQUIPMENT:** Band camp 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.
- **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. See tamukbands.com for the concert time. Campers may depart at the conclusion of their band's concert.
- **COMPETITIONS AND AWARDS:** Drum Major competition awards are given for first, second and third place in various categories. Band awards are presented for the outstanding and most improved instrumentalist in each concert band and jazz band. All campers are eligible for the awards, and an outstanding overall camper is awarded.
- **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 8, 2019.
- **DORMITORIES:** Campers are housed in modern air-conditioned dorms, 2 campers per room. Girls are housed in BISHOP Hall. Boys are housed in TURNER Hall.
- **ACTIVITIES:** All 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*****

- **CLASSES:** All elective classes are tentative and based on enrollment and student interest.

They include:

JAZZ BAND

LATIN JAZZ

WOODWIND ENSEMBLES

BRASS ENSEMBLES

PRIVATE LESSONS

COMPOSITION

MUSIC APPRECIATION

LEADERSHIP CLASS

CONDUCTING CLASS

PERCUSSION FUNDAMENTALS

PERCUSSION CLASS

**TEXAS A&M UNIVERSITY-KINGSVILLE
SYSTEM BLUE MARCHING CAMP
TAMUK SUMMER BAND CAMP APPLICATION
June 16-21, 2019**

(This form must be completely filled out. Write N/A if no answer.)

Camper Information

Camper Name _____
(Last) (First) (MI) Shirt Size _____ Gender _____ Age _____

Parents/Guardians Names _____ Parent Email _____

Mailing Address _____

City _____ State _____ Zip _____

Home phone _____ Parent's daytime phone _____

Medical Information

Remember that 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?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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

School Information

2019-20 School _____ Band Director _____ Band Director Phone _____

Have you participated in All-State Bands and/or Orchestras? _____ Yes _____ No

Grade Entering in Fall 2019 (circle one): 7 8 9 10 11 12

Primary Band Instrument (be specific, if appropriate, i.e., piccolo, bass trombone, bari sax)

Secondary Instrument (optional, i.e., bass, guitar, etc.)

Camp Enrollment

Please choose **one interest area**.

_____ Jr.Hi./M.S. Summer Band (Includes Band; Sectionals, and Instrumental Master classes)

_____ H.S. Summer Band (Includes Band; Sectionals, and Instrumental Master classes)

If you are interested in the Drum Major Intensive Track, please check below, otherwise, leave blank.

_____ Drum Major (HS Students only)

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

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

Statement of Consent

I, the undersigned, understand the policies of the Texas A&M University-Kingsville Summer Band Camp as described in this application and the information provided online at tamukbands.com. I agree to abide by the camp rules and guidelines, including those governing camp cancellation, and to cooperate with camp authorities. I grant the TAMUK Summer Camp permission to use any camp pictures in which the likeness of the applicant appears in camp advertising or publicity media.

I have read and understand the statements contained in this brochure and the *Participant Waiver, Indemnification and Medical Treatment Authorization Form (CAF 7)*, which I understand I must submit to participate in this camp, and I understand that said statements constitute a part of the agreement under which campers are enrolled at the TAMUK Summer Band Camp. I also agree that all decisions of the Camp Director are final and not subject to appeal of any kind.

Student Signature Date Parent Signature Date

FEE CALCULATOR (See Rate Schedule on page 1 for costs)

_____ Resident Camper Fee
_____ Commuting Camper Fee
_____ All-State Camper Fee
_____ Private Lesson Fee (only one private lesson guaranteed)
_____ Other Amount Enclosed
_____ **Balance Due at Camp (your \$100.00 non-refundable deposit is included in the camp cost)**

		<i>Amount Paid</i>		<i>Date Paid</i>		<i>Payment Method</i>		<i>Other</i>
DEPOSIT								
PAYMENT ONE								
PAYMENT TWO								
PAYMENT THREE								



**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 Summer Band Camp** (herein referred to as “activity”), which is sponsored by the **Music Department** 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 heat-related illness and other ailments inherent in a large-group activity, 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)

EMERGENCY CONTACT INFORMATION:

Name: _____ Relationship _____

Home Address: _____ City _____ State ___ Zip _____

Home _____ Work _____ Cell _____
Phone # Phone # Phone #

Name: _____ Relationship _____

Home Address: _____ City _____ State ___ Zip _____

Home _____ Work _____ Cell _____
Phone # Phone # Phone #

***Fill out the form completely and make sure all signatures are taken care of.**