

Application for Extra Day of String Camp August 20-21, 2017

Please fill in both pages of this form!

Name _____ Instrument _____

Fee includes tuition, continuing accommodations with all meals, or, for participants staying off campus, day use fee with 2 meals on campus (no breakfast)

Shared accommodations \$225

Single-room \$250

Off-campus \$170

Please write separate check for Extra Day and make check to Symphony of the Redwoods.

We will do our best to accommodate your requests; however, we reserve the right to create a viable schedule for the majority of applicants and will offer to return your check if we feel the activities will not be in line with your interests.

Cancellation Policy: Prior to June 1st fees will be refunded minus \$50. Refunds after June 1st are calculated based on date of cancellation. Once the 5-day camp begins, no refunds are given for illness or any other reason. If the possibility of needing to cancel is a concern, you may want to look into trip cancellation insurance.

WAIVER OF LIABILITY

I, the undersigned, hereby authorize the staff of Navarro River String Camp ("the Camp") to act for me according to their best judgment in any emergency that may require medical attention. And I hereby waive any claim I may have against the Camp as a result of any activities I participate in while at camp, whether they are activities of the Camp or not.
() Initials

I release the Camp and Symphony of the Redwoods from any and all liability for any injuries of any kind, including but not limited to personal injuries I may sustain while at the Camp, and for any illness that I may contract while at the Camp. I have no knowledge of any physical impairment that would be negatively impacted by my participation in the camp program as outlined on the Navarro River String Camp website and in the information materials I receive before camp.
() Initials

I release the Camp and Symphony of the Redwoods from any and all liability resulting from any lost or stolen property. I, the undersigned, represent that I either have insurance for my musical instrument(s) or otherwise assume full responsibility for any loss or damage to musical instruments which may occur while at the Camp.
() Initials

By submitting this application, I also state that I am covered by my personal medical insurance policy or otherwise assume full responsibility for my medical expenses. I understand that every effort is made to arrange ahead of time the music groups, music, and accommodations for the Camp, but I acknowledge that last minute changes owing to unforeseeable circumstances may be unavoidable. I have read, understand, and accept the terms of this waiver of liability form and further acknowledge that no oral representations concerning this document have been made to me as an inducement to signing this document. I agree to the financial arrangements stated above, and I have answered all the questions on the application form to the best of my ability and believe my answers are true and correct.

Applicant Signature: _____ Date: _____

Name _____

The Extra Day of camp will be structured according to the preferences you indicate here. Please comment on your interest in the following list of possible activities:

Playing with the coaches _____

Playing informally without coaching _____

Playing in chamber group receiving coaching for 2-3 sessions _____

Camp orchestra _____

Classes: Drones/Rhythm/Warm-ups/Stretch & Relax/Alexander Technique/Other?

Final sharing of some kind _____

Please indicate other interests not listed above:

Are there any activities mentioned here that would be essential for you to want to attend?

Any other information you would like to include?
