



**Texas A&M University
Corpus Christi**

**Islander Band Camp
Application**

CAMPER INFORMATION (PLEASE PRINT)

Name _____ School Grade (Fall 2008) _____

Mailing Address: Street _____

City _____ State _____ Zip _____

Home Phone _____ Cell phone _____

Email _____

School _____ Instrument _____

Parent/Guardian Name _____

Parent/Guardian Phone _____ Cell phone _____

To which camp are you applying? (Students entering 9th grade may choose junior high camp or high school camp, but the ultimate decision will be made by camp faculty at the camp auditions)

Junior High/Middle School (entering 7-9 grade) High School (entering 9-12 grade)

Are you interested in playing in Jazz Band? Yes No

Commuter Camper \$200 (includes tuition and daily lunch and dinner)

Resident Camper \$295 (includes tuition, room, and daily breakfast, lunch, and dinner)

Resident Campers: Roommate preference _____

Include Application, Medical Emergency Information form, Waiver/Consent to Participate form, and \$50 deposit (or full amount) and mail to:

**Islander Band Camp
6300 Ocean Dr., Unit 5720
Corpus Christi, TX 78412**

Please make checks payable to: TAMUCC Music Department

Islander Band Camp Information

The Texas A&M University-Corpus Christi **Islander Band Camp** offers middle school, junior high and high school students the opportunity to come to the "Island University" for a week of music and fun. The camp is open to all students with at least one year of experience on a woodwind, brass, or percussion instrument. Students will experience music-making with TAMUCC faculty and outstanding area music artists and educators. Classes will consist of group lessons, sectionals, full ensemble rehearsals, and basic music theory. Students will also enjoy activities each day, including recreational events and recitals. Students will be divided by age group—High School or Junior High/Middle School.

Deadlines, Deposit, and Refund Policy

Applications should be received by June 2, 2008 and must be accompanied by a \$50 deposit (or the full amount). Please make checks payable to *TAMUCC Music Department*. There will be a \$20 late fee for applications received after the June 2nd deadline.

Refunds, minus the \$50.00 deposit, can be made on or before June 2, 2008. No refunds can be made after June 2, 2008.

On-Campus Housing and Meals

Resident Campers will be housed in the Camden-Miramar Residence Halls on the Texas A&M-Corpus Christi Campus. Males and females will be housed on separate floors, and will be chaperoned by camp staff at all times. If no roommate preference is given, students will be paired by similar age group. If a roommate preference is given, both roommates must request each other. Resident campers will need to bring their own bedding linens, blankets, pillow, bath towel, and toiletries. Coin-operated laundry facilities are available in the residence halls. Campers will need to bring their own laundry detergent.

All camp meals are included in the camp tuition and fees (breakfast, lunch and dinner for Resident Campers, and lunch and dinner for Commuter Campers). All meals will be located in the University Center, and there will be a number of great food options. Meals will begin with lunch on the first day of camp.

Camp Auditions

All Islander Band Camp students will complete a simple and painless audition for band/chair placement. This is not an audition to get into the camp—ALL students with at least one year of experience on their instrument will be welcomed at the camp. **Auditions will be held on the morning of the first day of camp in the Center for the Arts building.** Students should bring their own audition music, selecting something that will best show off their skills and musicianship. The audition music should be no more than a few minutes long.

For questions or further information please contact us at:
(361) 825-2375 or shawn.smith@tamucc.edu

**Texas A&M University-Corpus Christi
Youth Program
Medical Emergency Information/Consent for Treatment**

Youth's name: _____
Address: _____
Social security number: _____ Date of birth: _____
Parent/guardian phone: Home _____ Work _____ Pager/Cellular _____

Medical Information

Allergies: _____
Current medications: _____
Chronic illnesses: _____
Date of last tetanus booster: _____
Physician: _____ Physician telephone number: _____

Insurance Information

Does youth have health insurance? No _____ Yes _____
Medical insurance company: _____ Tel. no. _____
Group number/ID number: _____ Name of insured: _____

Person(s) to Notify in Case of Emergency:

Name: _____
Relationship: _____
Street Address: _____
Phone: Day _____ Evening _____ Pager/Cellular _____

Second contact (if first person unavailable)

Name: _____
Relationship: _____
Phone: Day _____ Evening _____ Pager/Cellular _____

Consent for Medical Treatment:

The attending physician, appropriate staff, Texas A&M University-Corpus Christi, the Texas A&M University System, their Board of Regents, officers, employees, representatives and/or agents, and their heirs, successors, and assigns, shall not be responsible in any way for any consequence from diagnostic, medical and/or surgical treatment and are hereby released from any and all claims and causes of action that may arise, grow out of, or be incident to such diagnosis, treatment or surgery insofar as the law allows and provided that these services are performed with ordinary care and to the best of their ability.

Texas A&M University-Corpus Christi does not carry medical insurance for participants in any of its programs. It is recommended that you have appropriate medical coverage for your child.

I, as parent/legal guardian, grant permission for my child, _____
to receive medical treatment.

Signature of parent/legal guardian

Date

Texas A&M University-Corpus Christi
Youth Program
Waiver of Liability and Consent to Participate

I, _____, understand and agree that the officially-sponsored activities of A&M-CC involve certain known risks, including but not limited to, transportation accidents, personal injuries, and loss or destruction of my property. I understand and agree that A&M-CC cannot be expected to control all or said risks. In consideration of the benefits I will receive through my participation in the activities of (THE UNIVERSITY, STUDENT ORGANIZATIONS, YOUTH PROGRAMS, ETC.), I hereby expressly and knowingly **RELEASE A&M-CC, ITS OFFICERS, AGENTS, VOLUNTEERS, AND EMPLOYEES FROM ANY AND ALL CLAIMS AND CAUSES OF ACTION I MAY HAVE FOR PROPERTY DAMAGE, PERSONAL INJURY OR DEATH SUSTAINED BY ME ARISING OUT OF ANY TRAVEL OR ACTIVITY CONDUCTED BY, OR UNDER THE AUSPICES OF A&M-CC, WHETHER CAUSED BY MY OWN NEGLIGENCE OR THE NEGLIGENCE OF A&M-CC, ITS OFFICERS, AGENTS, VOLUNTEERS, OR EMPLOYEES.**

I hereby give my consent for any medical treatment that may be required during my participation with the understanding that the cost of any such treatment will be my responsibility.

Further, I voluntarily and knowingly agree to HOLD HARMLESS, PROTECT, AND INDEMNIFY A&M-CC, its officers, agents, volunteers, and employees, against and from any and all claims, demands, or causes of action for property damage, personal injury or death, including defense costs and attorney's fees, arising out of my participation in the activities of A&M-CC, REGARDLESS OF WHETHER SUCH DAMAGES, INJURY, OR DEATH ARE CAUSED BY MY OWN NEGLIGENCE, OR MY THE NEGLIGENCE OF A&M-CC, ITS OFFICERS, AGENTS, VOLUNTEERS, OR EMPLOYEES.

A&M-CC shall notify me promptly in writing of any claim or action brought against it in connection with my participation in these activities. Upon such notification, I or my representative shall promptly take over and defend any such claim or action.

I HAVE READ AND UNDERSTOOD THIS DOCUMENT, AND MY SIGNATURE EVIDENCES MY INTENT TO BE BOUND BY ITS TERMS.

Participant Name (please print): _____

If under 18, parent/legal guardian name (please print):

Signature _____

Date _____