



Kiwanis Club of Cambrian Park 15th Annual Summer Music Camp

Student Name: Last _____ First _____

Grade Entering in the Fall _____ School attending in the Fall _____

Instrument _____ Years of experience _____

Address: _____ City: _____ Zip Code: _____

Parent/Guardian Name: _____ Cell _____ Other _____

Parent/Guardian Name: _____ Cell _____ Other _____

Parent/Guardian Email Address: _____

Emergency Contact (Photo ID required): _____

Emergency Contact Phone: Home _____ Cell _____

List other authorized adults to pick up your child: _____

Medical Information:

Please List Allergies: _____

Best person to contact in case of emergency: _____ Phone: _____

Insurance Provider: _____

Camp T-shirt size: (Circle one) Youth - M / L / XL or Adult - S / M / L / XL

How did you find out about us? Check all that apply: Returning camper _____ School Flyer _____

Friend _____ Local Advertising _____ Other (please indicate) _____

Yes! I would like to make a tax-deductible donation to the Kiwanis Club of Cambrian Park Summer Music Camp Scholarship Fund of \$ _____ to help other children in need attend music camp.

Liability/Injury Waiver and Release-Photo Release

The undersigned as, parent/guardian hereby gives permission to for his/her, child, (name of child) _____ to attend all events described by the Kiwanis Club of Cambrian Park Summer Music Camp. The undersigned agrees not to hold the Kiwanis Club of Cambrian Park Summer Music Camp, its directors and employees liable for any injury suffered by the participant(s) attending the camp. The undersigned also allows the child to receive emergency medical care if needed. It is the understanding of the undersigned that refund or credit will not be given once the camp is in session. The undersigned acknowledges that disruptive behavior during camp could result in my child being asked to leave camp.

The Kiwanis Club of Cambrian Park has my permission to use photographs which include my child participating in Summer Music Camp for use on its web site and informational brochures.

PLEASE CHECK ONE Yes No

Parent/Legal Guardian Name (Please Print): _____

Signature: _____ Date: _____

NAME: _____

INSTRUMENT: _____

CIRCLE **ONE** in each column for each hour session, or number preferences

Beginning Instruction No Band/3rd grade No prior music experience	Beginning Band 4th grade & up No prior band experience	Intermediate Band 5th grade & up 6 mo. to 2 yrs. band experience	Advanced Band 7th to 9th grades 2 + yrs. band experience
9:00 to 10:05 am	9:00 to 10:05 am	9:00 to 10:05 am	9:00 to 10:05 am
Percussion Ensemble	Percussion Ensemble Beginning Guitar	Beginning Guitar Percussion Ensemble Int/Adv Jazz Ensemble NEW! Songwriting	Beginning Guitar Percussion Ensemble Int/Adv Jazz Ensemble NEW! Songwriting
10:10 to 11:00 am	10:10 to 11:00 am	10:10 to 11:00 am	10:10 to 11:00 am
Choir	Choir Beginning Guitar Percussion Ensemble NEW:Songwriting	Choir Beginning Guitar Beginning Jazz Ensemble Percussion Ensemble NEW! Songwriting	Choir Beginning Guitar Beginning Jazz Ensemble Percussion Ensemble NEW! Songwriting
11:30 am to 12:30 pm	11:30 am to 12:30pm	11:30 am to 12:30 pm	11:30 am to 12:30 pm
Music FUNDamentals!	Beginning Band (no beginning drums)	Intermediate Band I Intermediate Band II	Advanced Band
ADVANCED SESSION 6th-9th Grade WIND PLAYERS ONLY! Small Ensembles Play with like groups of instruments.			

There will be a 30-minute snack/concert break provided for your child from 11:00 to 11:30 each day.
Students taking the Advanced Session must provide their own lunch.

JUNE 18-JUNE 29, 2018 Morning session only: 9:00 am -12:30 pm Morning & Advanced: 9:00 am-2:00 pm	LOCATION UNION MIDDLE SCHOOL 2130 Los Gatos-Almaden Rd San Jose, CA 95124	FEES: Morning session only: \$375.00 Registration after May 25: \$400.00 ----- Morning and Adv. Session: \$475.00 Registration after May 25: \$500.00
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For additional questions call or text: (408) 655-4768, or email KSMCmail@gmail.com. 10% discount on 2nd child (sibling) for morning session only. (-\$37.50). Scholarships available; please ask for more information.

Send registration forms and fees to:

KSMC
PMB 130
6469 Almaden Expwy, Ste 80

MAKE CHECKS PAYABLE TO: The Kiwanis Club of Cambrian Park
Sorry, we cannot accept credit cards or PayPal