

IMPORTANT!!

EACH CAMPER MUST DOWNLOAD AND PRINT their appropriate camp/grade **Information Sheet, Audition Music**, (if applicable) and **SFA Campus Map**.
www.sfasu.edu/musiccamps

GENERAL INFORMATION

LOCATION

All camps are sponsored by and located on the campus of Stephen F. Austin State University. SFASU is located in historic Nacogdoches, Texas, in a setting of natural beauty in the pine forests of East Texas.

ELIGIBILITY

Participation in the SFA Summer Band Camps is offered to students entering seventh grade through 12th grade who are interested in developing their band skills and musical interests. Instrumentalists and drum majors will benefit from our camps regardless of their level of proficiency.

ROOMMATES AND HOUSING

It is not necessary to request a specific roommate prior to camp. Students wishing to room together must come through registration together. Groups wanting adjacent rooms must come through registration together. Students are housed in air-conditioned residence hall facilities, with two students per room.

FOOD SERVICE

All meals are provided in a university cafeteria. Campers may choose from a wide variety of foods served at every meal.

CAMPER SUPERVISION

Every activity of camp life is supervised and attended by one or more of the following:

- A. Camp Faculty – more than 90 distinguished music educators and performing artists employed by the SFA Summer Band Camps.
- B. Resident Assistants – “RA’s” trained and certified by SFASU Housing and Student Life personnel.
- C. SFASU Band Camp Counselors – most of whom are students in training to become band directors.

RECREATION

Swimming, movies, game night, dances, competitions, concerts, volleyball, basketball, and pizza parties are all planned by our Recreation Director.

INSURANCE

All campers must have a signed medical release form in our files (see application form). Insurance will cover accidents or illnesses that occur at camp. Minor needs are served by University Health Services. Parents are called immediately if illness is critical.

FOR FURTHER INFORMATION WRITE OR CALL

SFA BAND CAMPS
P.O. Box 13043 SFA Station
Nacogdoches, TX 75962
Phone (936) 468-4702
Fax (936) 468-1318

Website: <http://www.sfasu.edu/musiccamps>

Stephen F. Austin State University
SCHOOL OF MUSIC
SUMMER BAND CAMPS
Box 13043, SFA Station
Nacogdoches, TX 75962



Stephen F. Austin State
University
Nacogdoches, Texas

2009 SUMMER BAND CAMPS

REGISTRATION FORM

DUPLICATE AS NEEDED

Stephen F. Austin State University
**2009 SUMMER BAND CAMPS
 REGISTRATION FORM**

 Last Name First Name

 Address

 City State Zip

 Your Present School Name Grade Next Year

 Instrument (Specific: alto, tenor, etc.) Date of Birth

 Home Phone Daytime phone (parent/contact person)

 Insured Parent Date of Birth and Social Security #

NOTE:
 Student Social Security # It is not necessary to specify a room-
 (MUST have SS#) mate at this time. Male Female

The SFA Band and Drum Major Camps do not tolerate cases of vandalism, fighting, substance abuse and other violations of camp safety regulations. No refunds are given in cases of expulsion from camp. I understand that the camp reserves the right to expel a student on these grounds.

 Parent/Guardian Signature

**For High School Campers Only –
 CHECK IF APPLICABLE:**

TMEA & ATSSB ALL-STATE HONORS 2008-2009
 Students who have earned TMEA or ATSSB All-State Band or Orchestra honors will receive a scholarship of \$210 to attend our High School Band Camp. (You pay only \$215. Application and full payment must meet entry deadline.)

TMEA & ATSSB ALL-AREA HONORS 2008-2009
 Students who have earned TMEA or ATSSB All-Area Band honors will receive a scholarship of \$100 to attend our High School Band Camp. (Your cost \$325. Application and full payment must meet entry deadline.)

These scholarships are non-transferable and do not apply to other summer music programs at SFASU. Provide your band director's signature. This certifies that the student named above meets the requirements for this scholarship.

 Your Band Director's Signature

**MAKE A COPY FOR YOUR RECORDS, THEN
 MAIL THIS APPLICATION AND FULL PAYMENT OR
 DEPOSIT TO:**

SFA OFFICE OF SPECIAL EVENTS
 BOX 6163, SFA
 NACOGDOCHES, TEXAS 75962-6163

SUMMER BAND AND AUXILIARY CAMPS

Check the program(s) for which you are applying:

MS BAND CAMP June 7-12 ENTRY DEADLINE
 (for students entering grades 7 & 8 next fall) May 29

HS BAND CAMP June 14-19 ENTRY DEADLINE
 (for students entering grades 9-12 next fall) June 5

MILITARY DM June 7-12 ENTRY DEADLINE
 May 29

CORPS STYLE DM June 7-12 ENTRY DEADLINE
 May 29

FEES (Check all that apply)

- Full Band Camp..... \$425
 Full Drum Major Camp..... \$325
 Commuter (lunch included)..... \$225

REFUNDS

\$40 fee on refunds prior to entry deadline: \$50 fee on refunds after entry deadline. NO REFUNDS AFTER CAMPS BEGIN. Social Security number required for all refunds.

ALL PAYMENTS

Reserve your place with a \$200 deposit or full payment.
**BALANCE OF ALL FEES DUE BY ENTRY DEADLINE
 PAYMENT CAN BE MADE ONLINE**

Or by money order, school check,
 Personal check, or credit card.

NOTE: If your payment is for more than one student,
 please include itemized list on separate page.

**BALANCE OF ALL FEES DUE
 BY ENTRY DEADLINE**

Make checks payable to: SFA Summer Band Camps

AMOUNT ENCLOSED: \$ _____

**FOR ON-LINE PAYMENT & camp info go to:
<http://www.sfasu.edu/musiccamps>**

**Authorization for
 Medical Treatment**

Please complete this form in its entirety to reserve a place in the SFA summer music program for your child. Each participant must be covered by camp insurance.

I, _____ give permission for

my child, _____ to be treated

by the Stephen F. Austin State University physicians and further authorize treatment at Nacogdoches Memorial Hospital or Nacogdoches Medical Center in the event my child needs treatment the university physicians are unable to provide while in attendance at SFA Band Camp.

Does your child have allergies to medications or food?

If yes, state: _____

Does your child have a chronic illness or disability?

If yes, state: _____

Does the student require any special treatments or medication?

If yes, state: _____

Is the child covered by health insurance?

If yes, please give the company name and policy number:

Company Name: _____

Policy Number: _____

Insured Parent Date of Birth and Social Security #

Do you give permission for the staff at the camp to administer over-the-counter medications (headache tablets, upset stomach formulas, etc.) in the event your child requires medication?

Yes No

If your child requires specialized care or treatment, written permission from a family physician must accompany your child so that we may ensure care. SFA Summer Camps is not responsible for payment of treatment.

 Signature of Parent/Guardian

For credit card payment, please complete the following information below and return.

Name of Student: _____ MC Discover

Name on Card: _____ Visa AMEX

Card Number: _____

V-Code: _____ (Last 3 digits found on back of the credit card, or 4 digits found on the front of AMEX) Exp. Date _____

Card Holder's Signature: _____ Amount: \$ _____