



# August 5–11, 2014 BAND CAMP REGISTRATION FORM

Deadline: May 12, 2014

## STUDENT INFORMATION please PRINT LEGIBLY

First Name		Last Name		Class of: 20_____
Address				
City	State	Zip	Student ID	
Telephone ( )	Cell Phone ( )		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
Family's (main) email:			Student's email:	
Are you <i>riding</i> to camp on the bus?		<input type="checkbox"/> YES (encouraged)	<input type="checkbox"/> NO	
Are you <i>returning</i> from camp on the bus?		<input type="checkbox"/> YES (encouraged)	<input type="checkbox"/> NO	
Do you need a school instrument?		<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Concert Band Instrument			Marching Band Instrument	
Band(s): <input type="checkbox"/> Not Yet Auditioned <input type="checkbox"/> Symphony Band <input type="checkbox"/> Concert Band				
<input type="checkbox"/> Varsity Band Brass/Percussion <input type="checkbox"/> Varsity Band Woodwind <input type="checkbox"/> Jazz Band				

### My band camp t-shirt (adult sizes) :

X-Small  Small  Medium  Large  X-Large  2X-Large  3X-Large

Name of Parent 1

(please print)

Name of Parent 2

**THE TOTAL FEE FOR BAND CAMP IS \$375.00.**

*THIS INCLUDES A T-SHIRT, TRANSPORTATION, MEALS, COUNSELORS, LODGING, AND ACTIVITIES AT CAMP.*

I AM PAYING IN FULL \$ 375.00

I AM PAYING A DEPOSIT IN THE AMOUNT OF (\$25, \$60, \$135) \$ \_\_\_\_\_

I HAVE APPLIED FOR A BAND CAMP SCHOLARSHIP IN THE AMOUNT OF \$ \_\_\_\_\_

**SCHOLARSHIP DEADLINE: PLEASE CONTACT MR. LEACH BY APRIL 23**

I AGREE that in applying for Pioneer Band Camp, I will conform to all the rules of the Interlochen Arts Camp and Pioneer High School as stated in Band Camp Bulletin Number 1.

STUDENT SIGNATURE \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_

### Band Camp Sunday—August 10, 2014 Families & Friends Charter Bus

I, \_\_\_\_\_, would be interested in:

- Helping organize a charter bus to & from Interlochen on Band Camp Sunday.
- Riding the charter bus to & from Interlochen.

Make checks payable to "Pioneer Band Association" and send (with completed Registration and Health Forms) to:

**David A. Leach, Director of Bands  
2013 Band Camp Registration  
Pioneer High School  
601 West Stadium Blvd  
Ann Arbor, MI 48103**

DATE RECEIVED \_\_\_\_\_ CHECK NUMBER \_\_\_\_\_ TOTAL RECEIVED \$ \_\_\_\_\_

SCHOLARSHIP APPROVED \_\_\_\_\_ SCHOLARSHIP AWARDED \$ \_\_\_\_\_ BALANCE DUE \$ \_\_\_\_\_