



University of Arkansas at Monticello Summer Camps 2017

Application (please type or print in ink)

Name _____ Date of Birth _____

Mailing Address _____ T-Shirt Size _____

City _____ State _____ Zip _____

Name of School (May 2017) _____

Name of School (Sept. 2017) _____

Grade (Sept. 2017) _____ Sex: Male [] Female [] Race _____

Parents Name(s) _____ Phone _____

Regularly checked email address: _____

(We will send out regularly important band camp information out via email.)

Instrument you play _____ Brand _____ Serial # _____

Choice of Roommate (if any) _____ Roommate's school _____

Beginner Camp June 13-17: on campus 250.00 [] off campus 185.00 []

Junior High Camp June 13-17: on campus 250.00 [] off campus 185.00 []

Senior High Camp June 20-24: on campus 250.00 [] off campus 185.00 []

Jazz Camp July 16-21: on campus 250.00 [] off campus 185.00 []

Auxiliary Camp 17-20: on campus 220.00 [] off campus 145.00 []

If you plan to attend camp we must receive your application and full payment by **May 31, 2016**. No refunds after June 1st. For students planning to stay on campus, applications will be accepted until the above deadline or until the dorms have been filled. So, the earlier you apply the better.



In case of emergency

I, _____, parent/guardian of _____, recognizing and being fully aware of the potential dangers involved, authorize band camp staff to transport my child to a physician or emergency room if necessary for medical care and I specially release the staff member from the liability whatsoever except for acts of gross negligence.

Signature _____ Date _____

To insure proper treatment of your student it is a requirement to send an insurance card with him or her to camp in case of an emergency.

Emergency Telephone Numbers _____

Family Physician _____ Phone Number _____

Any medical conditions? _____

Please list any allergies you may have. (if none please write "none" in the blank)

Current Medications _____

Tetanus/Diphtheria _____

Mail Your Payment and Application To: Cashier Office - Band Camp
P.O. Box 3597
Monticello, AR 71656

Make Checks Payable To: UAM Band Camp

Questions: 1-870-460-1060 UAM Music Office
1-870-460-1370 UAM Band Camp Office
anders@uamont.edu 870-460-1860
askew@uamont.edu 870-460-1270

