

Ladies Rock Camp Madison

October 22-24th, 2010 Camper Application

Ladies Rock Camp Madison will be held October 22-24th, 2010. Tuition for the 3 days is \$250. Limited tuition adjustments are available for those in need. Please contact info@grcmadison.org for a tuition adjustment form. If you would like to volunteer for the week or the showcase please email info@grcmadison.org. Please include a non-refundable \$10 application fee with this application and send to:

Girls Rock Camp Madison, PO Box 45587 Madison, WI 53744.
All checks should be made out to Girls Rock Camp Madison

1. Camper Contact Information

NOTE: Camper participation in showcase is a mandatory part of camp attendance.

Name of Camper _____

Home Address _____

City _____ State _____ Zip _____

Mailing Address (if different from above) _____

City _____ State _____ Zip _____

Email Address _____

Home Phone () _____ - _____ Cell Phone () _____ - _____ Work Phone () _____ - _____

2. Preferred Camp Instrument:

The camp will provide instruments and equipment during camp hours. If you have an instrument at home, please let us know what instrument and/or equipment you can bring:

Please mark "1" by your first choice "2" by your second and "3" by your third:

Guitar _____ Keyboards _____ Bass _____ Drums _____ Vocals _____ Other _____ (please specify)

What is your experience, if any, with your instrument of choice?

Name 3 songs you can play on your instrument of choice: (it is OK if there are none!)

(1) _____

(2) _____

(3) _____

Name a few of your favorite bands:

NOTE: We love beginners! If you are a beginner, please tell us why you chose your instrument of choice.

3. More About the Camper

How did you hear about Ladies Rock Camp?

Have you attended a rock camp before? ____ Yes ____ No If yes, when, where, and for what instrument(s)?

Do you have any medical conditions or allergies? ____ Yes ____ No If yes, please list:

Is there anything the staff of Ladies Rock Camp needs to know about your health? Please explain:

4. Emergency Contacts

Contact Name 1 _____

Relationship to Camper

Home Phone () _____ - _____ Cell Phone () _____ - _____ Work Phone () _____ - _____

Contact Name 2 _____

Relationship to Camper

Home Phone () _____ - _____ Cell Phone () _____ - _____ Work Phone () _____ - _____

5. Express Yourself!

We want to know who you are, why you want to attend rock camp, what music means to you, or anything else you'd like us to know. There are a million ways to express these things – so, write a poem, a story, or a letter; make a collage; draw a picture; take pictures; make a video; record a song; et cetera. Do anything you'd like to say something about yourself and rock camp! Please know that these pieces may not be returned to you, so send us something we can keep. You are also to include a cover letter with your piece, telling us why you want to come to camp. **Your application will not be complete without this part!**

Any photos, recorded (audio or video) and written materials created for and/or during camp are Ladies Rock Camp Madison property and may be used for promotional purposes in the future. Ladies Rock Camp Madison does not discriminate on the basis of race, religion, national and/or ethnic origin, marital status, sexual orientation, mental or physical ability, or gender identity in the administration of any of its educational programs, admission policies, and other camp-related policies and programs, as well as volunteer and employment-related policies and activities.

Ladies Rock Camp Madison Medical Release Form

Complete and return this form by the first day of camp.

This form must be completed before campers can participate in camp activities.

Consent to Medical Treatment and Release of Liability (Read this before signing)

In consideration of being allowed to participate in the camp, related events, and activities, I hereby Release, Waive, Discharge, and Covenant Not to Sue Ladies Rock Camp Madison, their officers, servants, agents, employees, this camp, and its employees, and directors (hereinafter referred to as Release) from any and all liability, claims, demands, or course of action whatsoever arising out of or relating to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to me, whether caused by the negligence of the release, or otherwise, while participating in this camp, or while in, on or upon the premises where the camp is being conducted.

To the best of my knowledge, I am in good physical condition and I am not aware of any physical infirmity which would place me at risk to participate in any way with camp activities. I am fully aware of the risks and hazards connected with Ladies Rock Camp Madison. I VOLUNTARILY ASSUME FULL RESPONSIBILITY OF ANY RISK OF LOSS, PROPERTY DAMAGE OR PERSONAL INJURY INCLUDING DEATH, that may be sustained by me, or any loss or damage to property owned by me, as a result of being engaged in Camp activities, whether cause by the negligence of the release or otherwise. I further hereby AGREE TO INDEMNIFY AND HOLD HARMLESS THE RELEASE from any loss, liability, damage or cost, including court costs and attorney's fees that may accrue related to my participation in this camp.

During the period of camp, I hereby give permission for the staff of Ladies Rock Camp Madison to administer appropriate medical attention to me in the event of an accident, illness or injury. I will be responsible for any and all costs of medical coverage and treatment provided not covered by insurance.

It is my express intent that this WAIVER OF LIABILITY and HOLD HARMLESS AGREEMENT shall bind the members of my family, domestic partner and spouse, if I am alive, and my heirs, assigns personal representative, if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE, AND COVENANT NOT TO SUE the above named RELEASEE, I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be construed in accordance with the laws of the State of Wisconsin. In signing this release, I acknowledge and represent that I have read and understand it and sign it voluntarily; I am at least 18 years of age and fully competent; and I execute this Release for full, adequate and complete consideration fully intending to be bound by the same.

I have read this waiver of liability and sign it freely and voluntarily without inducement.

Camper Signature: _____

Print Camper(s) Name(s): _____

Medical Insurance Company Name: _____

Policy Number: _____ Group#: _____

Insurance Company Phone #: _____

Release Form for Media Recording

I, the undersigned, do hereby grant permission to Ladies Rock Camp Madison to use the image of me, _____ . Use includes the display, distribution, publication, transmission, or otherwise use of photographs, images, and/or video taken of me for use in materials that include, but may not be limited to, printed materials such as brochures and newsletters, videos, and digital images such as those on the Ladies Rock Camp Madison Web site.

I give unrestricted permission for my image to be used in print, video, and digital media. I agree that these images may be used by Ladies Rock Camp Madison for a variety of purposes and that these images may be used without further notifying me. I do understand that my last name will not be used in conjunction with any video or digital images.

Signature _____

Date _____

Please make a copy of this form for your own records.

If you have questions, contact info@grcmadison.org .