### \*\* IMPORTANT INFORMATION: PLEASE READ! \*\*

#### THIS FORM IS TO BE USED FOR MONEY ORDER REGISTRATIONS ONLY

We encourage you to use website registration if at all possible: direct your browser to www.nwbandcamps.com for website registration.

#### 2019 Tuition \$599

Final payment for either camp (including any school scholarships) must be received by May 16, 2019. If final payment has not been received by this date, your space will be given to an applicant on the waiting list. Please complete the form below and mail it with a money order for either (a) the full amount of \$599 -- or (b) a minimum \$200 deposit NOW with the balance due at the offices of Northwest Band Camp no later than May 16, or any time before. Do not wait until your child receives a school scholarship to send in the application and deposit. Money will be returned to you in a camp check for any amount you receive in a school scholarship sent to our office. For those purchasing money orders who find the \$200 deposit financially difficult, please contact the Band Camp office at 541-752-0452. T-Shirts are optional, and cost \$15 each. Indicate size on application form and add \$15 to deposit.

# – NO PERSONAL CHECKS WILL BE ACCEPTED, MONEY ORDERS ONLY WITH THIS FORM

Please make money order payable to Northwest Band Camps, Inc. and write the student's complete name and which week he or she is attending in the memo portion of the money order. If you prefer, you may enclose a money order for the total amount with this application. Mail completed application and money order to:

NORTHWEST BAND CAMPS, INC. • 1428 NW 13th St, Corvallis, OR 97330

Cancellations made before May 10 will incur a \$35 cancellation fee. Cancellations made AFTER May 10 will incur a \$150 nonrefundable cancellation fee for camp expenses up to that date. All tuition and fees will be required for campers registering after May 16.

"No Shows" receive no refund. A camper is considered a "no-show" unless Northwest Band Camps is notified of the camper's inability to attend camp AT LEAST the Thursday morning prior to camp. If certain circumstances prevent the student from attending camp, a parent must contact the Camp Office at 541-752-0452, at least 3 days before the first day of camp. No refunds will be given for campers who leave for homesickness or for disciplinary reasons. Pro-rated refunds are given for illness as advised by a doctor. We accept applications on a first-come basis until both camps are filled. If space is available, we will accept applications up to two days prior to each camp together with the full amount in a money order – not personal checks (Make a copy of completed application for your records). Both camps fill early.

## APPLICATION FORM:

Last Name	First Name				Ni	ckname			
Please complete this form ar please submit a separate app			e ado	dress b	oelow.	If mor	e than one	child per fan	nily,
TO BE FILLED OUT BY P.	ARENT OR GUARDIAN –	– PLEAS	SE P	RINT	i				
Mail Completed Form to: NORTHWEST BAND CAM	MPS, INC. • 1428 NW 13	th St, Co	rvall	is, OR	2 9733	0			
Date of Application:	Instrumer	nt:				_			
Please indicate which camp	your child would prefer:								
O Date: June 23 - June 29									
Age Date of Birth	Sex	_							
Complete Mailing Address									
Street						_Apt _		_	
City		State		Z	Zip			_	
Name of Parent or Legal Gu	ardian					_			
(H) Phone:	Cell:			(	W) Ph	one:			
Email Address:									
Parental Consent: I know of this camp. I authorize the ca seeking emergency aid at the employees, agents and assig acknowledge that I am response	mp staff to attend to any inju e nearest hospital. I hereby r ns from any liability that ma	ary to my elease an ay arise fi	chil d ho om i	d that ld har ny ch	may omless	occur w the No participa	hile attend rthwest Bar ation in the	ing camp inc nd Camps, IN	luding
Signature of Parent or Legal	Guardian						Date		
Circle the grade in school to	be entered in Fall 2019:	7 8	9	10	11	12			
Name of School & Address									
Name of Band Director									
All cabin assignments will be request a roommate it may students must agree upon a spassphrases. Fill in the nar	be necessary to share a desecret passphrase in order to	<b>ouble bu</b> pair up r	nk w	v <b>ith t</b> l mates	nat ro	ommat	e.) To requ	iest a roomm	ate, atching
Last Name	First Name		Pa	assphi	rase				
T-Shirt (Optional) \$15 Ent	er size (Adult)	S/M/L/2	KL -	Add	l to de	posit an	nount		