

DRUMLINE CAMP

July 14-17, 2019

REGISTRATION FORM

Resident Camper Fee: \$355.00 / Commuter Camper Fee: \$295.00. All fees must be paid before Monday, July 1. (Refund requests must be received no later than Monday, July 1.) There is no down payment required. Please send this registration form, along with your cash, check or money order made payable to Missouri Western State University, to Drumline Camp, Conferences and Scheduling Services, MWSU, 4525 Downs Drive, Spratt Hall 208, St. Joseph, MO 64507; or bring your payment in person to Leah Spratt Hall, Room 208 on the MWSU campus. If you would like to pay with credit card, please fill out that portion.

Name _____
 Male/Female _____ Date of Birth _____
 Parents' Names _____ Address _____
 City / State / Zip _____ Phone _____ Emergency _____
 School _____ Entering Grade _____
 Musical Director _____ 1st Time Marcher? Yes _____ No _____
 T-shirt Size (free to campers only) Youth: 6-8 _____ 10-12 _____ 14-16 _____
 Adult: S (34-36) _____ M (38-40) _____ L (42-44) _____ XL (46-48) _____ XXL _____

Camper Conduct Contract: *I promise to abide by all camp rules and accept the full authority of the camp director.*

Camper's Signature _____

Would you like to room with a friend? Yes / No / Who? _____

Parent/Guardian Address _____

Please let us know if you have a disability that would limit or prohibit your participation in this event. We will contact you promptly to discuss appropriate accommodations.

Medical Information: please provide any information regarding your child's health, physical and/or emotional status that we should know about to best serve the needs of your child. Provide information such as preferred doctor/telephone, medication, serious health problems, activity limitations, etc. Attach additional sheets, if needed.

Parent/Guardian Permission/Release Form: In signing this application (1) I give permission for my camper to be photographed or videotaped for camp promo purposes, (2) for my child to be transported in University vehicles for approved off-campus activities. I understand/agree that the Drumline Camp and/or Missouri Western staff has the right to dismiss my child for due cause. In case of medical emergencies, I understand every effort will be made to contact the parent or guardian of camper as named. If named person cannot be reached, consent is hereby given for my child to receive medical and/or surgical care as recommended by physician or hospital.

Parent/Guardian Signature _____ Date _____ / _____ / _____

Email Address _____

Credit Card Information:

Card Number _____ Exp Date _____ / _____ / _____

Street Number/Zip Code where bill is received: _____ CVV (code on back of card) _____

Please Note: A \$20.00 cash refundable key deposit is due at camp registration –
PLEASE do not include this deposit in the registration fee.
Return Form to MWSU, Conferences and Scheduling Services, Attn: Patty Kuechler
4525 Downs Drive, Spratt Hall 208, St Joseph, MO 64507