

## Le Moyne College Summer Arts Institute 2019 Application

Student's Name: \_\_\_\_\_ Date of Birth (mo/day/year) \_\_\_\_\_

Grade completed June 2019 \_\_\_\_\_ School attended \_\_\_\_\_ District \_\_\_\_\_

Home Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Home Telephone # \_\_\_\_\_

**\*\*E-mail to be used for follow-up communication:** \_\_\_\_\_  
 (For efficiency and to save environmental resources, we plan to send further information via email; if this is not a good method of communication for you, please let us know.) \_\_\_email is not a good method of communication for me

### *Parent/Guardian Information*

\_\_\_\_\_  
 Name Daytime Phone Number

\_\_\_\_\_  
 Name Daytime Phone Number

### Camp(s) applying for:

- |   |   |
|---|---|
| <input type="checkbox"/> Film (July 8-19) <i>entering grades 8-12</i><br>(also complete SECTION A)              | <input type="checkbox"/> Theatre (July 8-19) <i>entering grades 5-12</i><br>(also complete SECTION B)           |
| <input type="checkbox"/> Vocal Jazz (July 8-12) <i>entering grades 8-12</i><br>(also complete SECTION C)        | <input type="checkbox"/> Strings (July 22-26) <i>entering grades 4-12</i><br>(also complete SECTION D)          |
| <input type="checkbox"/> Musical Theatre (July 29-Aug. 2) <i>entering gr 9-12</i><br>(also complete SECTION E ) | <input type="checkbox"/> Creative Writing (July 8-12) <i>entering grades 7-12</i><br>(also complete SECTION F ) |

**For all camps, circle t-shirt size: (Adult) S M L XL**

|  |  |
|--|--|
| Film tuition (\$475)   |  |
| Theatre tuition (\$475)  |  |
| Vocal Jazz tuition (\$240)   |  |
| Strings tuition (\$240)  |  |
| Musical Theatre tuition (\$240)  |  |
| Creative Writing tuition (\$160) <b>half day</b>   |  |
| Deposit (\$50 non-refundable)<br><b>**Pay only if not sending full tuition upon registration**</b> |  |
| Optional extended hours<br>theatre or film: \$100<br>strings, musical theatre, or vocal jazz: \$50 |  |
| <b>Total enclosed</b>  |  |

**Payment Method**

**Check (made payable to Le Moyne College)**  
 Check # \_\_\_\_\_

**Credit Card**  
 Discover  MC  Visa  AmEx

\_\_\_\_\_  
 Card # Expiration date

\_\_\_\_\_  
 Print Cardholder's Name

\_\_\_\_\_  
 Daytime Phone Number

\_\_\_\_\_  
 Cardholder Signature

Please use a separate form for each student. Mail form and non-refundable deposit or full payment to:

**Le Moyne College Summer Arts Institute  
 1419 Salt Springs Road  
 Syracuse, NY 13214**

**Publicity Permission**

I understand that photographic images of my child may be taken during workshops, rehearsals, or productions. I give the Summer Arts Institute permission to use photographs of my child in future publicity, including online advertising and Facebook.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

***Disability Accommodation***

I will require special accommodation to fully participate in this program.

My requirements: \_\_\_\_\_  
Please indicate requirements

***Health***

**Authorization of Medical Treatment of Minors**

Student Name: \_\_\_\_\_

Parent/Guardian(s) \_\_\_\_\_

Address: \_\_\_\_\_

Daytime Phone(s) \_\_\_\_\_

I, the parent or legal guardian of \_\_\_\_\_ (print student's full name) do hereby give permission for emergency medical treatment to be administered to the above-named minor in the event that an emergency has occurred and I cannot be reached at the telephone numbers listed above.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**Family Physician**

Physician's name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

**Emergency Contact**

Please give name, address and telephone number of a person to whom we can release the student in case of emergency if you cannot be reached.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Relationship to student: \_\_\_\_\_

**Health History/Allergies**

Please list anything in your child's health history, including allergies, which should be known.

***Hospitalization***

Insurance company or government program: \_\_\_\_\_

I.D. or contract number: \_\_\_\_\_

The Summer Arts Institute does not carry insurance to pay for treatment of any injuries to children participating in its summer program. It is understood that the parent(s)/guardian(s) have health insurance for the student or have the means to pay for necessary medical treatment.

**SECTION A: PLEASE COMPLETE THIS SECTION FOR FILM CAMP ONLY**

What kinds of movies do you watch and like best (e.g., action-adventure; comedy; drama; biography; documentary)?

What are your one or two favorite films?

Have you ever worked on a MAC?

Have you worked with film editing software (iMovie, Final Cut Pro, Avid)?

**SECTION B: PLEASE COMPLETE THIS SECTION FOR THEATRE CAMP ONLY**

Have you had any previous theatre experience?       yes       no

If yes, please describe:

**SECTION C: PLEASE COMPLETE THIS SECTION FOR  
VOCAL JAZZ CAMP ONLY**

Do you have any previous vocal experience?  yes  no

If yes, please describe:

Check all the voice parts you are able to sing?  Soprano  Alto  Tenor  Bass  Not sure

Which do you prefer? \_\_\_\_\_

Have you ever taken private voice lessons?  yes  no

Can you read music?  yes  no

Do you play any instruments?  yes  no

If yes, which instruments?

Do you have any vocal jazz experience  yes  no

If yes, please describe:

Are you in your school chorus?  yes  no

Are you in any school select vocal groups?  yes  no

If yes, which ones?

Have you participated in

All-County Chorus?  yes  no

All-County Vocal Jazz?  yes  no

Area-All State Chorus?  yes  no

All-State Chorus?  yes  no

All-State Vocal Jazz?  yes  no

Do you have a song that is performance ready?  yes  no

If yes, what is the title? \_\_\_\_\_

Name of your school music teacher: \_\_\_\_\_

**SECTION D: PLEASE COMPLETE THIS SECTION FOR STRINGS CAMP ONLY**

Instrument:

Violin     Viola     Cello     Bass

How long have you been playing this instrument?

Was your instruction     private     school     group

With whom have you studied?

---

How long have you been reading music? \_\_\_\_\_

Have you been Suzuki trained?     yes     no

Do you have a polished piece for recital consideration?     yes     no

If yes, please list title and composer:

**SECTION E: PLEASE COMPLETE THIS SECTION FOR  
MUSICAL THEATRE CAMP ONLY**

Do you have any previous vocal experience?     yes     no

If yes, please describe:

Voice Part:     Soprano     Alto     Tenor     Bass     Unknown

Have you ever taken private voice lessons?     yes     no

Can you read music?     yes     no

Do you have a piece that is performance ready?     yes     no

If yes, please list title:

Do you have any previous acting experience?     yes     no

If yes, please describe:

**SECTION F: PLEASE COMPLETE THIS SECTION FOR CREATIVE  
WRITING CAMP ONLY**

What do you like to write?

What do you like to read?