



Summer Camp Enrollment Process 2012

Dear Parent or Guardian,

Thank you for your interest in our Summer Day Camp program. To ensure that your child is properly enrolled, please note the following:

1. Enrollment

Campers are enrolled on a first come, first served basis. There are a set number of slots for each camp, each instrument. We do not hold spaces for campers who have not turned in their Enrollment Forms/deposit payment. To ensure you get your desired slot, please do the following:

- Enrollment forms must be **completed and signed** at time of Enrollment
- Print all information **legibly**
- Medical, Emergency Contact and Permission Forms are **due prior to camp start date**. Campers without these completed forms will not be allowed to participate in the program until they are received.

The fastest way to get your Enrollment Form to us is to fax it to our secure, dedicated line on 703-232-1048. (Please note you may need to use a "1" when calling from certain areas.) You may also drop off your forms at one of our locations or mail them to: School of Rock, 11425 Green Moor Lane, Oakton, Virginia 22124. You may email completed forms to nova@schoolofrock.com.

2. Enrollment for Audition-Only Camps

If you would like to enroll your child in one of our advanced/audition-only camps, please call 703-850-2100 to schedule your evaluation with an instructor. Please bring completed forms to the evaluation/audition.

3. Confirmation

Once we receive and process your Enrollment Form, you will be sent a confirmation **via email**. **If you do not receive an email confirmation you should assume that we did not receive your Enrollment Form**. Please call 703-850-2100 to ensure we have the paperwork and that your camper is enrolled.

4. Payments and Due Dates

A 50% deposit is required to secure your camp slot prior to May 1st, 2012. Final payment is due on May 1st. Enrollments received after May 1st must be paid in full.

5. Communications

We communicate exclusively through email. Please make sure our information is not going into your Junk or Spam folders. If you are not getting any email correspondence, you should let us know immediately as it means we do not have a good email address for you. It is your responsibility to ensure we have your correct email address.

5. Refund Policy

Please note our refund policy which is **strictly enforced**.

All deposits are non-refundable. Full payment is due on May 1st 2012. Failure to pay in full by May 1st 2012 may result in your slot being given to a waitlisted camper. Withdrawing after May 1st 2012 but before June 1st 2012 will result in forfeiture of 75% of the remaining camp tuition. Withdrawal on June 1st or after will result in forfeiture of the full tuition paid.

6. Questions? Call Us! 703-850-2100. Or send us an email on nova@schoolofrock.com

Inspiring Kids to Rock...On Stage and in Life



2012 CAMP SCHEDULE BY LOCATION

(PLEASE NOTE THE CAMP CODE WHEN FILLING OUT YOUR ENROLLMENT FORM)

ASHBURN VIRGINIA CAMPS		DATE OF CAMP	CAMP CODE
SONG WRITING & RECORDING CAMP	SESSION 1 SWRA1	JUNE 11- 15, 2012	SWRA1
SONG WRITING & RECORDING CAMP	SESSION 2 SWRA2	JULY 23 - 27, 2012	SWRA2
ROCK 101 CAMP	SESSION 1 R101A1	JUN 18-22, 2012	R101A1
ROCK 101 CAMP	SESSION 2 R101A2	JUNE 25 - 29, 2012	R101A2
BAND CAMP - INDIE/ALTERNATIVE	SESSION 1 BCIAA1	AUGUST 13-17, 2012	BCIAA1
BAND CAMP - METAL	SESSION 1 BCMA1	JULY 16- 20, 2012	BCMA1
ROCK SCHOOL BOOT CAMP	SESSION 1 RSBCA1	JULY 2-13, 2012	RSBCA1
ROCK SCHOOL BOOT CAMP	SESSION 2 RSBCA2	JULY 30 -AUGUST 10, 2012	RSBCA2

VIENNA VIRGINIA CAMPS		DATE OF CAMP	CAMP CODE
ROCK 101 CAMP	SESSION 1 R101V1	JUNE 25-29, 2012	R101V1
ROCK SCHOOL BOOT CAMP	SESSION 1 RSBCV1	JULY 2-13, 2012	RSBCV1
ROCK SCHOOL BOOT CAMP	SESSION 2 RSBCV2	JULY 16-27, 2012	RSBCV2
ROCK SCHOOL BOOT CAMP	SESSION 3 RSBCV3	JULY 30 - AUGUST 10, 2012	RSBCV3
ADVANCED ROCK SCHOOL BOOT CAMP	SESSION 1 ARSBCV1	AUGUST 13-24, 2012	ARSBCV1

SILVER SPRING MARYLAND CAMPS		DATE OF CAMP	CAMP CODE
SONG WRITING & RECORDING CAMP	SESSION 1 SWRS1	JUNE 18 - 22, 2012	SWRS1
SONG WRITING & RECORDING CAMP	SESSION 2 R101S2	AUGUST 13- 17, 2012	SWRS2
ROCK 101 CAMP	SESSION 1 R101S1	JUNE 25-29, 2012	R101S1
ROCK 101 CAMP	SESSION 2 R101S2	JULY 2-6, 2012	R101S2
BAND CAMP - ZEPPELIN	SESSION 1 BCZS1	JULY 16- 20, 2012	BCZS1
ROCK SCHOOL BOOT CAMP	SESSION 1 RSBCS1	JULY 23 - AUGUST 3, 2012	RSBCS1
BAND CAMP - METAL	SESSION 1 BCMS1	AUGUST 6 - 10, 2012	BCMS1



Summer Camp 2012
Camper Emergency Contact Information

Camper Name: _____

Camper Birth Date: _____

Parent/Guardian(s) Name(s): _____

Home Address: _____

Mother's Email Address: _____

Father's Email Address: _____

Emergency Telephone Numbers – MUST COMPLETE LEGIBLY

1. Parent Guardian Mother Cell: _____

Father Cell: _____

Mother Work: _____

Father Work: _____

Mother Home: _____

Father Home: _____

2. Additional Contact Name: _____

Relationship: _____

Home: _____

Work: _____

Cell: _____



SUMMER CAMP 2012 PERMISSION TO PARTICIPATE

Name of Parent/Legal Guardian: _____

Address: _____

City, State, Zip: _____

Name of Minor Child: _____

I agree to allow my minor child to participate in the School of Rock Summer Camp 2012. I will not hold School of Rock/All Music Methods LLC liable for any injury that may occur on the grounds of the camp or in any activities associated with my child's participation or attendance at the facilities used for camp. I agree to pay for any and all expenses (including but not limited to any medical expenses) that might relate to my child's care and treatment.

I assume all responsibility for any liabilities my son/daughter incurs in the form of injury to any person or damage, destruction or theft to public or private property or equipment. I hereby agree to indemnify and hold School of Rock/All Music Methods LLC harmless from any claims against the organization and its agents arising from my son or daughter's conduct or participation in the camps.

I authorize School of Rock to publish photographs/video taken of my son/daughter, his or her first name and any quotations that he/she provides for use in printed publications, presentations, mailed promotions, exhibits, press releases, video, CDs, websites, or social media. Since participation in photography/videos produced by School of Rock/All Music Methods LLC is voluntary, neither my child nor I will receive any financial compensation. I further agree that participation in any photography/videos produced by School of Rock/All Music Methods LLC confers no rights of ownership whatsoever. Any photograph/video/quote taken may be shared with School of Rock partners while carrying forth these provisions.

Signature of Parent/Guardian

Date

Please Print Name of Parent/Guardian



SUMMER CAMP 2012 MEDICAL INFORMATION FORM

Please Note: If your camper requires the administration of medication either on a daily basis or in an emergency situation (like an EPI Pen or inhaler) please provide specific administration instructions in writing when you bring your child to camp the first day.

Camper Name: _____

Please list any food or medication allergies (let us know the extent of any allergies):

Please list any physical limitations/conditions that require special assistance:

Physician's Information

Physician or Practice Name: _____

Phone Number: _____

Medical Insurance Information

Name of Insurance Carrier: _____

Policy Number: _____

Group Number: _____

In the event of an emergency I authorize emergency medical personnel to provide care for my minor child without my consent if I cannot be reached in a timely manner.

Signature of Parent or Guardian *Date*

Printed Name of Parent or Guardian