

WHITE KEY STUDIOS

MUSIC LESSONS • RECORDING STUDIO

WKS Summer Music Camp 2019

Summer music campers will learn and explore music by contemporary pop and rock bands by delving into multiple instruments, creating, collaborating, and forming their own bands!

Campers will be mentored by current working and recording artists, and guided in writing original songs, designing band merch, recording demos, plugging in and performing "patio gigs," and more!

4-6 year old music campers will focus on keys and vocals, while **7-12 year olds** will add guitar/bass/drums to their bands.

Our **10-13 year old** camp bands will be taken to the next level, learning modern production and recording techniques so they can continue their musical journey beyond camp in true garage-band style!

Saturday Singer/Songwriter Camp will work to develop artists **13-17 years old**. The main focus will be to work with students in an artist development program. Vocal/Music consultation, songwriting sessions and catalogue evaluation, Pre-production, demo recording, streaming/distribution channels

No experience necessary for any age group!
We will develop and unite bands according to instrument interest and ability.

White Key Studios Summer Music Camps will be held
Monday-Friday 9am-3pm.

To complete registration:

1. Complete and submit WKS Summer Camp Registration, Emergency Contact and Medical Release forms.
2. Review and sign camp policy agreements.
3. Make necessary deposit and registration fee (fee waived for current monthly WKS Students). (\$20)
4. Submit credit card information to be kept on file in our secure system.
5. Payments are to be made in full by June 1, 2018.

CAMP SCHEDULE BY AGE AND WEEKS:

4-6 Years Old

Monday - Friday

9am-3pm

\$299/session

4-6 year-old music campers will explore music by collaborating and exploring several different instruments. When forming bands the kids will focus on keys, vocals and songwriting.

Session 1: 6/10 - 6/14

Session 2: 7/1 - 7/5

Session 3: 7/29 - 8/2

7-9 Years Old

Monday - Friday

9am-3pm

\$299/session

7-9 year-old music campers will explore music through collaboration and creating a full 5-piece band. Mentoring on keys, drums, guitar, bass and vocals, the kids will have the opportunity to learn and play like a real contemporary pop/rock band.

Session 1: 6/17 - 6/21

Session 2: 7/8 - 7/12

Session 3: 8/5 - 8/9

10-13 Years Old

Monday - Friday

9am-3pm

\$299/session

10-13 year-old music campers will take their bands to the next level, learning modern production and recording techniques so they can continue their musical journey beyond camp in true garage-band style.

Session 1: 6/24 - 6/28

Session 2: 7/15 - 7/19

Session 3: 7/22 - 7/26

13-17 Years Old

Saturdays

10am-4pm

\$315/session

Saturday Singer/Songwriter Camp will work to develop artists 13-17 years old.

The main focus will be to work with students in an artist development program. VocalMusic consultation, songwriting sessions and catalogue evaluation, Pre-production, demo recording, streaming/distribution channels

Session 1: 6/8, 6/15, 6/22, 6/29

Session 2: 7/6, 7/13, 7/20, 7/27

Session 3: 8/3, 8/10, 8/17, 8/24

Pricing:

Early registration is encouraged. Pricing is based on completed registration to secure proper instructor to student ratio, pairing and camp supplies.

Sign Up Rates:

\$299/one-week M-F session
\$315 Saturday full day session

*Rates are only secured with \$50 deposit, \$20 registration fee and completed registration forms.
Registration fees are waived for all current monthly WKS students.
Full payment is due **for all sessions by June 1, 2018.**
Payments can be made by cash or credit; however, a credit card must be kept securely on file.*

Cancellation Policy:

If you cancel 21 days or more from the start of the session:	Will receive a refund of what you have paid minus the \$50 non-refundable deposit and \$20 registration fee.
If you cancel 8-20 days to the start of the session:	Will receive a refund of what you have paid minus the \$50 non-refundable deposit, \$20 registration fee and \$40 late cancel fee.
If you cancel 0-7 days to the start of the session:	No refund will be given.
Medical Emergency Cancellation for medical issues/illnesses.	Please provide a doctor’s note and notify us of cancellation as early as possible. You will receive a refund for what you have paid minus the \$50 non-refundable deposit (per week) and \$20 registration fee.

SUMMER CAMP 2018 REGISTRATION

CAMP ATTENDING: _____ **Week of:** _____

CHILD

First _____ Last _____

Gender: Male __ Female __ Tee Shirt Size: _____

Birth date ____/____/____ Age _____

Street Address _____

Town/City _____ State _____ Zip code _____

PARENT/GUARDIAN

Parent/Guardian #1

First _____ Last _____

Street Address _____

Town/City _____ State ____ Zip Code _____

Home Phone _____

Cell phone _____

E-mail _____

Occupation _____

Work Phone _____

Parent/Guardian #2

First _____ Last _____

Street Address _____

Town/City _____ State ____ Zip Code _____

Home Phone _____

Cell phone _____

E-mail _____

Occupation _____

Work Phone _____

***Child lives with** _____

EMERGENCY CONTACT

Child Name: _____

Emergency Contact #1

First Name _____ Last Name _____

Home Phone _____ Work Phone _____

Cell Phone _____ Email _____

Relation to child _____

Emergency Contact #2

First Name _____ Last Name _____

Home Phone _____ Work Phone _____

Cell Phone _____ Email _____

Relation to child _____

Please list those people who are permitted to pick up your child:

WKS CAMP POLICIES:

Behavior dismissal: Camper fees are non-refundable if camper is removed for appropriate disciplinary reasons. Physical violence and/or bullying towards another camper or staff member and any outside contraband brought to WKS are grounds for immediate dismissal.

Parent's/Guardians initials _____

Lunch/Snack Policy: Please provide lunch, 2 snacks and juices or drinks for your child for each day of camp.

Parent's/Guardians initials _____

Early Drop off/ Late Pick up: Please make the appropriate arrangements for your child to be dropped off and picked up according to camp session times. If an early drop off is unavoidable, please remain supervising your child until the session begins. Please call the office (854) 999-1429, if a late pick up is unavoidable. A late pick up fee of \$5 per each 10 minutes late may be applied.

Parent's/Guardians initials _____

Equipment Policy: White Key Studios requests your attention and cooperation in supporting and encouraging your child to obey the policies, procedures, and practices of the studio. Children are supervised at all times, however, deliberate misuse of recording equipment, instruments and the facilities, resulting in broken or damaged equipment are the sole responsibility of the parent and will be charged accordingly.

Parent's/Guardians initials _____

Photo/Video/Audio Policy: I agree that White Key Studios (including its staff, employees and agents) can take and use photos, video and audio recordings of my child SOLELY for the limited purposes of marketing White Key Studios which may be publicly available, without compensational obligation, and I hereby release the Camp (including its staff, employees and agents) from any claims or liability resulting from their use of photos, videos and audio recordings.

Parent's/Guardians initials _____

MEDICAL INFORMATION

Child Name: _____

Insurance Information

Policy Number _____

Name of Health Insurance Provider _____

Primary

Physician _____ Phone _____

Hospital Preference _____

Please list any medical problems, including any requiring maintenance medication (i.e. Diabetes, Asthma, Seizures).

Please fill out consent for medication distribution form for all prescription medications needed to be dispensed by staff during camp hours.

<u>Medical Problem</u>	<u>Required treatment</u>	<u>Should paramedic be called?</u>
_____	_____	Yes/No
_____	_____	Yes/No

Is your child presently being treated for an injury or sickness, or taking any form of medication for any reason?

Yes__ No__ If yes, explain: _____

Is your child allergic to any type of food or medication?

Yes__ No__ If yes, explain: _____

Does your child require a special diet?

Yes__ No__ If yes, explain: _____

The purpose of the above listed information is to ensure that medical personnel have details of any medical problem which may interfere with or alter treatment.

In case of medical emergency contact:

	Name	Phone #	Relationship to Child
Contact #1			
Contact #2			
Contact #3			

I understand that I will be notified in the case of a medical emergency involving my child. In the event that I cannot be reached, I authorize the calling of a doctor and the providing of necessary medical services in the event my child is injured or becomes ill.

Parent's/Guardian's Initials _____

I understand that White Key Studios and its affiliates or teachers will not be responsible for the medical expenses incurred, but that such expenses will be my responsibility as parent/guardian.

Parent's/Guardian's Initials _____

Acknowledgement of risk waiver and release of liability: I understand and acknowledge that participation in the events designed and/or operated by White Key Studios LLC, including all of the activities and the use of facilities and equipment, involves an inherent and unavoidable risk of injuries, harm, and loss. I understand that although White Key Studios takes precautions to provide proper organization, supervision, and equipment, it is impossible for White Key Studios to guarantee absolute safety. I understand there are numerous risks associated with participating in White Key Studios camp events. Equipment used in activities may break, fail, or malfunction and cause injury. Some of the equipment used in activities may cause injuries even when used as intended. These are some, but not all, of the risks inherent in the camp's events; a complete listing of inherent risks is not possible and some risks cannot be anticipated.

I authorize the child/children named in this Acknowledgement of Risk, Waiver, and Release of Liability ("Release") to participate in the events and all activities operated by White Key Studios. On my own behalf and on behalf of the child/children named in this Release, I ACKNOWLEDGE THE RISKS associated with participation in the camp's events and expressly and voluntarily assume the risks of participation in the camp's events and activities operated by White Key Studios and HEREBY WAIVE AND RELEASE ALL CLAIMS AND LIABILITIES (WHETHER ON BEHALF OF THE CHILD/CHILDREN NAMED IN THIS RELEASE OR FOR MY OWN BENEFIT) AGAINST THE CAMP (INCLUDING ITS STAFF, EMPLOYEES, AND AGENTS) THAT MAY ARISE FROM INJURIES, HARM OR LOSS RESULTING FROM PARTICIPATION IN THE EVENTS AND ACTIVITIES OPERATED BY THE CAMP, INCLUDING (WITHOUT LIMITATION) ANY CLAIMS ALLEGING NEGLIGENCE BY THE CAMP (INCLUDING ITS STAFF, EMPLOYEES, AND AGENTS), to the fullest extent allowed under the law. If any aspect of this waiver is deemed to be invalid, I acknowledge that the remainder of the agreement will continue to have full force and effect. If my agreement on behalf of my child/children to release their claims against White Key Studios is deemed invalid for any reason, I agree to indemnify White Key Studios in connection with any claims arising out of my child's/children's participation in the events and activities operated by the Camp, including payment of reasonable defense costs incurred by White Key Studios.

Child's full name _____

Parent/guardian full name (print) _____

Parent/guardian signature _____

Credit Card Authorization: I understand and agree with the above-stated policies. By placing my credit card information on file, I hereby authorize White Key Studios LLC to charge my credit card ONLY according to the agreed terms and conditions above. CREDIT CARDS WILL ONLY BE CHARGED WITH CONSENT OR FOR FAILURE TO COMPLY WITH THE ABOVE POLICIES.

Child's full name _____

Parent/guardian full name (print) _____

Parent/guardian signature _____

Name on card: _____

Card Type: _____

Card Number: _____ Exp Date: _____

CVV number (on back of card): _____

Billing address associated with card: _____
