



## MUSICAL EXPERIENCE INFORMATION

2 weeks: July 4th - July 18th (inc. arrival/departure days, classes will start at 9.00am July 5th)

Main Instrument: \_\_\_\_\_ Years studied: \_\_\_\_\_

Current Teacher: *(private instructor, or school teacher if no private instructor):*

\_\_\_\_\_

*Teacher's contact phone or email (with their permission ONLY)*

\_\_\_\_\_

School / College: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

**Previous experience** - Please fill in for all that apply, at what level and for how long. For example: "high school/1 year", "community group / 2 years" etc.

Orchestra \_\_\_\_\_ Wind Ensemble \_\_\_\_\_

Jazz Band \_\_\_\_\_ Pit Orchestra \_\_\_\_\_

Musical Theatre \_\_\_\_\_ Honours Band \_\_\_\_\_ Other \_\_\_\_\_

*Please provide any additional performance information here, for example: competitions and results (if known); auditions; second instrument studied, and for how long; etc*

## PRIVATE LESSONS

Each student may choose to receive one free private lesson on their main instrument with the appropriate CYMC faculty. Extra lessons cost \$30 for each 30 minute segment. All students are encouraged to take private lessons and lessons can be added at any time up to the end of the first week of the camp.

I wish to take 1 free lesson. yes \_\_\_\_\_ no \_\_\_\_\_ not sure \_\_\_\_\_

I wish to take more private lessons and I understand that there will be an extra charge. (The number of additional lessons will be discussed with the student and faculty member at CYMC.)

yes \_\_\_\_\_ no \_\_\_\_\_ will decide later \_\_\_\_\_

## CONCERTO COMPETITION

All students are encouraged to take part in the Concerto Competition, but a certain level of preparation before arriving at the CYMC is required. Those who wish to take part in the competition should consult their current private instructor to determine if they are ready, and to determine what repertoire is suitable for the student. If you do not have a private instructor and are interested in taking part in the competition, please contact the CYMC for more information.

All efforts will be made to have the orchestral or wind band accompaniment for your piece available during the summer but there is no guarantee. Early notification to CYMC of your repertoire is important. The CYMC reserves the right to organize the concerto winner(s) with any appropriate ensemble and that performance with the orchestra is not guaranteed.

I have spoken with my private instructor and wish to take part in the Concert Competition yes \_\_\_\_ no \_\_\_\_

My piece is \_\_\_\_\_ (title)

\_\_\_\_\_ (composer)

\_\_\_\_\_ (movement)

## PROGRAM & ADMINISTRATION FEES

**Classical Workshop**                      \$800 - 2 weeks    \$500 - 1 week                      \$\_\_\_\_\_ .00

CYMC encourages students to stay for the entire two week program. Some exceptions can be made for one week study. Please contact the Registrar for more information.

Two or more from the same family will pay \$725 each any time.

Refer a friend and get 10% off your tuition fee

Also, please be aware that any fees paid after July 1st may be subject to HST

Non-refundable administration fee **(please ensure fee is added to total)**                      \$                      **85.00**

Total Program and Administration Fees                      \$\_\_\_\_\_ .00

*A \$100.00 loss and damage deposit is required—This will be refunded Sept 1st 2010, if no loss or damage occurs Please make out a separate cheque for this amount.*

## CAMP SERVICES FEES

Yes, would like to stay in Resident Dorms (includes all meals, accommodation, transportation and activities)

**ROOM & BOARD FEES**                      \$400 per week    x \_\_\_\_\_ weeks                      \$\_\_\_\_\_ .00

Day student (has own accommodation, optional individual meal fees shown below)

### SEPARATE MEALS FEES

Individual Lunches                      \$ 7.00/day x \_\_\_ days                      \$\_\_\_\_\_ .00

Individual Dinners                      \$ 9.00/day x \_\_\_ day                      \$\_\_\_\_\_ .00

**Total Camp Services Fees**                      \$\_\_\_\_\_ .00

**TOTAL ENCLOSED FEES**                      \$\_\_\_\_\_ .00

Please Note: All fees must be received with your application form before CYMC will process your application and secure your place in this year's program.

### Method of Payment

Cheque *(made out to CYMC)* VISA | MASTERCARD

Name of Cardholder \_\_\_\_\_

*Please Print*

Card Number \_\_\_\_\_ Expiry Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Refund Policy

I agree to abide by the rules of the Comox Valley Youth Music Centre and to supply the necessary forms as requested. I understand that no deductions or refunds will be made for late arrival, early departure, or expulsions for disciplinary reasons.

Student Signature \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date: \_\_\_\_\_

(if student under 18)

## CYMC HEALTH FORM 2010

Student Name (please print): \_\_\_\_\_

Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex: M \_\_\_\_ F \_\_\_\_  
Month day year

Parent/Guardian \_\_\_\_\_

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

Home Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Cell Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Email \_\_\_\_\_

If unreachable in an emergency please notify:

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

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

Home Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Cell Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Email \_\_\_\_\_

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

Please include information about any areas of special concern such as eating disorders,  
 sleeping problems: \_\_\_\_\_

Operations, injuries & hospitalizations: *(with dates)* \_\_\_\_\_

Present medications or treatments: \_\_\_\_\_

Please list all allergies, including allergies to medications: \_\_\_\_\_

Name of Student's Physician: \_\_\_\_\_

Phone Number of Student's Physician: (\_\_\_\_) \_\_\_\_\_

**IMPORTANT: Students are responsible for their own medical & hospital insurance coverage**

Medical Plan Name: \_\_\_\_\_

Medical Plan number: \_\_\_\_\_

ID number (if applicable): \_\_\_\_\_

**Parent/ Guardian Authorization:** This health history is accurate to the best of my knowledge,  
 and the person herein described has my permission to engage in all planned CYMC activities, except  
 as noted by the examining physician and me. In the event I cannot be reached in an EMERGENCY,  
 I hereby give permission to the health care provider selected by the CYMC administration to hospitalize,  
 provide proper treatment , and to order injections for the student.

\_\_\_\_\_  
 Parent/ Guardian Signature

\_\_\_\_\_  
 Date

## CYMC CONDUCT AGREEMENT 2010

It is CYMC's goal for all students to enjoy a positive learning experience. We are committed to providing a safe environment for all students and expect that all students will conduct themselves in a positive and respectful manner. This includes respecting all people and property. To achieve this common goal we have provided the following conduct code.

### **Harassment**

CYMC has a **zero tolerance** policy for discriminatory behaviour. Any student found by their peers or staff to be physically, verbally or otherwise abusive to others will be reprimanded according to CYMC discipline policy.

### **Drugs and Alcohol**

CYMC students under legal age found in possession or under the influence of alcohol or drugs will be asked to leave the camp. Any student found in possession of or under the influence of illegal drugs will be sent home immediately after contact with the local RCMP. CYMC students of legal age found in possession or under the influence of alcohol or drugs on campus or in CYMC accommodations or found to be providing alcohol or drugs to under age students will be asked to leave the camp.

### **Smoking**

Smoking in CYMC facilities is prohibited. The law prohibits students under the age of 19 from smoking.

### **Conflict**

From time to time, students may encounter conflict with another student, staff or faculty member. If you cannot resolve the conflict on your own, a councilor or the Student Services Coordinator will be available to mediate. If no resolution is achieved, your program director together with a CYMC board member, will be asked to assist in resolving the conflict.

### **Property and Facilities**

While you are here, you are a representative of the CYMC and are expected to use consideration and respect for all property and facilities, including that of CYMC, other students, or any other property that has been made available during your program. Many of these items come to CYMC as a result of donations or personal lending. Your care will help ensure these contributions continue. Any student found to be causing damage to property, either by willful intent or neglect, will be held responsible for that damage and billed accordingly.

### **Curfew**

There is a general 10:00 pm curfew for all students staying in CYMC residence. Arrangements may be made with the Councilor or Student Services Coordinator in advance to accommodate concerts, movies, and activities, which may last beyond this time. Students are expected to adhere to the sign-in/sign out policies at all times. Any student absent without permission at the check-in time will be reprimanded according to the discipline policy. Students may not have overnight guests. Students will sleep in the dormitories provided and are prohibited from moving their beds /cots / sleeping bags to other spaces during sleep time.

## CYMC DISCIPLINARY POLICIES

We do recognize that from time to time some students may test the boundaries of this code and of respectful behavior. In this case, the following procedures will be followed.

**Phase 1 – Verbal warning / reminder.** For the most part our students are able to respond to verbal reminders about their behavior/conduct. These will be given by: a Councilor, Student Services Coordinator, Faculty, or other members of staff.

**Phase 2 – Written warning.** If inappropriate conduct persists, or is more serious, the student will receive a written warning regarding their behavior and this will be kept on the student’s file records.

**Phase 3 – Written warning and contact of parents regarding the incident / behavior.** A repeat of the behavior outlined in a ‘Written warning’ will result in a second written warning and contact with the students parents/guardians. A ‘Warning of Dismissal’ notice will be issued.

**Phase 4 – Dismissal\*.** As a last resort a student will be dismissed and required to leave CYMC for the summer. In such a case parents will be notified and appropriate transportation home will be arranged. Parents/Guardians will be invoiced for any additional charges incurred. No fees will be refunded. For the most part the Discipline Procedure will follow incremental ‘Phases’ as indicated. However, it is up to the Councilors, Student Services Coordinator, and a Board member to determine the appropriate level of response. Any student conduct that results in the harm of others or themselves will carry a higher level of response. For the most part the Discipline Procedure will follow incremental ‘Phases’ as indicated.

**\* Some examples of behavior that will trigger an immediate ‘Phase 4’ response are (but are not limited to): the possession of illegal drugs or alcohol on premises; physical harm of another student; and bullying/harassment.**

## CONDUCT & DISCIPLINE CONTRACT

I, \_\_\_\_\_ agree to the Conduct Agreement and Discipline Procedures.  
Print Student name

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian if student is under 18

\_\_\_\_\_  
Date

# CYMC PERMISSION FORM 2010

Student's Name: \_\_\_\_\_

Program: \_\_\_\_\_

Please complete all sections:

Does student have permission to be transported by certified CYMC volunteers or staff for CYMC activities?

Yes \_\_\_\_\_ No \_\_\_\_\_

Does student have permission to swim on beaches with no lifeguard on duty but with councilor and /or volunteer supervision?

Yes \_\_\_\_\_ No \_\_\_\_\_

Does the student have permission to ride in a car driven by someone other than staff or approved volunteer (e.g.: other students/ friends car)?

Yes \_\_\_\_\_ No \_\_\_\_\_

Does the student have permission to leave CYMC facilities with anyone other than his/her own parents/guardians? For example: grandparents, relatives, family friend.

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide name(s):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian if student is under 18

\_\_\_\_\_  
Date

## PHOTO AND AUDIO RELEASE

We at CYMC delight in the sights and sounds of our summer students as they practice and perform. Throughout the season, we will be documenting these sights and sounds through photographs, video footage and audio recordings, many of which will be made available to the students and public.

I hereby give the CYMC photographer, sound engineer and assignees my permission to license the images and sound recordings in any media and for any purpose (except defamatory) which may include, among others, advertising, promotion, marketing and packaging for any product or service. I agree that the images and sound recordings may be combined with other images, text and graphics; they may be cropped, altered or modified.

I agree that I have no rights to the images or sound recordings and all rights to the images belong to the CYMC photographer, sound engineer and assignees. I acknowledge and agree that I have no further right to additional consideration or accounting, and that I will make no further claim for any reason to the photographer, CYMC or the assignees. I agree that this release is binding upon my heirs and assignees. I agree that this release is irrevocable, worldwide and perpetual and will be governed by the laws of the Province of British Columbia, Canada.

### Definitions:

“Media” means all media including digital, electronic, print, television, film and other media now known or to be invented.

“Photographer” means photographer, illustrator, filmmaker or cinematographer, sound engineer or any other person or entity photographing or recording me.

“Assignees” means a person or any company to who photographer or CYMC has assigned or licensed rights under this release as well as the licensees of any such person or company.

“Images” means all photographs, film or recording taken of me as part of the season.

“Consideration” means something of value I have received in exchange for the rights granted by me in this release.

Dated \_\_\_\_\_ Name of Applicant \_\_\_\_\_

Name of Parent or Guardian \_\_\_\_\_  
(Signature of Parent or Guardian is required for an applicant under 19years)

## RELEASE & WAIVER

In consideration of CYMC accepting this application I, for myself, my heirs, executors, administrators and assignees release CYMC its respective servants, agents or employees from any demands, damages, and actions or causes of action arising out of or in consequence of any loss, injury or damage to my person or property incurred during my residency in Resident Dorms, and while attending at or participating in a CYMC music course or any other CYMC sanctioned activity, including off-campus activities and travel to and from same, notwithstanding any such loss of injury or damage may have arisen by reason of the negligence of CYMC, its servants, agents or employees. Without limiting the generality of the foregoing, I further release any recourse which I may now or hereafter have resulting from any decision of CYMC.

Dated \_\_\_\_\_ Name of Applicant \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_  
(Signature of parent or Guardian is required applicant under 19 years of age)

## INDEMNIFICATION

If the applicant is under the age of 19 this indemnification must be signed by a parent or guardian.

In consideration of CYMC accepting the within application, I, \_\_\_\_\_, parent/guardian of \_\_\_\_\_ agree to indemnify CYMC, its servants, agents or employees from any claims or demands which might be made against CYMC arising out of or in consequence of \_\_\_\_\_ being a resident in Resident Dorms, or attending at or participating in a CYMC music course or any other CYMC sanctioned activity including, but not limited to, off-campus activities and travel to and from same.

Dated (Signature of parent or Guardian) \_\_\_\_\_