



### **Mission Statement**

The summer music programs at Western Connecticut State University foster growth in every participant. We strive to promote individual learning and growth through working in ensemble settings. We, as individuals, love our gift of music and take great pride and joy in working with young musicians. It is our hope to foster that love of music within each camper that passes through our rehearsals, no matter what skill level, no matter what their career goals are. Our goal is for campers to have a fun and enjoyable week here.

### **Expectations**

Attendance – We expect that campers will be ready to begin classes and rehearsals at the appropriate time. All rehearsals and classes are mandatory in order for students to reap the benefits of the camp program. Failure to be punctual will result in disciplinary action.

Attire – Campers are expected to choose clothing that will make them comfortable and capable of rehearsing in a productive manner. Distracting clothing will take away from the experience.

Attitude – Campers are expected to carry a positive attitude throughout the week. Actively participating, challenging themselves, and keeping a positive outlook will make camp a wonderful and enjoyable experience.

### **Code of Conduct**

The staff at WCSU music camp wants your week at camp to be filled with exciting experiences, new friendships and fun. In order for this to happen, campers are expected to be considerate of others, participate fully in the camp program, observe camp rules, and respect all camp facilities. *Severe violations will result in the camper being sent home without refunds.*

### **General Policies**

Personal Appearance – If students are dressed inappropriately, they will be asked to return to their dorms and change.

Alcoholic Beverages / Illegal Drugs – Possession and/or use of alcoholic beverages or illegal drugs will result in immediate expulsion from camp with no refund.

Smoking – There is no smoking allowed by any student at any time while at camp. Smoking will result in immediate expulsion from camp with no refund.

Moving around campus – All campers must travel between buildings using the buddy system. Campers may ONLY be in designated camp areas.

Vehicles - While at camp, resident campers are not allowed to ride in or be in possession of any motor vehicle. Commuter students are not allowed to leave campus during the day.

Respect of Property – Any student defacing any property, whether public or private, will be liable for damages and considered for expulsion.

### **Meal Rules**

All meals are mandatory. Check in with your counselor upon entering. Make sure you eat something healthy, and drink plenty of fluids. Remember to leave the space as you found it – no garbage should be left on the table or the floor. Failure to comply will result in clean-up duty for the following meal.

### **Free Time**

During morning announcements, all campers must sign up for free time activities. Campers are never to be in areas unsupervised by WCSU camp staff.

## Medication

**Campers are not allowed to be in possession of over-the-counter or prescribed medication while at camp, nor are they allowed to self-administer medication. All medication must be turned in to the appropriate camp staff at camp registration, and must be properly documented on the camper's health forms.**

## Phone Usage

Campers are only allowed to call home during free time. Phones should not be used during rehearsals or after lights out. While bringing cell phones to camp is discouraged, any cell phone that is brought to camp must be registered with a counselor. Students will be allowed to hold onto their cell phones, but must adhere to regular phone usage rules. Inappropriate use of the cell phone will result in confiscation of the cell phone for the duration of camp.

## Auditions

Students should select a piece that demonstrates their level of ability (i.e. region audition piece, NYSSMA piece, all-state piece, etc.) to determine ensemble placement. School music teachers or private lesson teachers should be able to help you select a piece. Auditions will also include sight-reading and a scale up to 4 sharps or 4 flats. For some additional audition guidelines, please check our website. **All audition results are final.**

## Concert Information

This year, we will have 3 student concerts at the Band and Jazz Camp:

- The Chamber Ensemble concert will be on Thursday, July 21st at 7pm.
- The Jazz Band concert will be on Friday, July 22<sup>nd</sup> at 7pm.
- The Steel Pan Ensemble and Concert Band Concert will be on Saturday, July 23<sup>rd</sup> at 12:00 noon. There will be no formal intermission – just enough time to make necessary stage changes. Campers will have brunch prior to the concert and will wear their camp t-shirt for the concert with neat khaki or denim shorts.

## Resident Information

Check-In:            Sunday, July 17<sup>th</sup>, 2011      9am-11am      Newbury Hall Lobby  
All parents are asked to leave campus by 11:30am. There will be a luncheon and orientation for residents at 12pm, followed by placement auditions.

Check-Out:           Saturday, July 23<sup>rd</sup>, 2011 immediately following the concert

### Dorm Rules:

- Curfew – All students are expected to be on their own floor at 10pm. Lights out will be at 10:30pm SHARP. If students need to go to bed earlier, they need to check in with a counselor. Failure to comply with curfew and lights out rules will result in early lights out (10pm) the following day.
- Fire Drills – At some point during the course of camp, a fire drill will happen. Please make sure to be fully clothed, and have your shoes on before exiting the building. Please exit the building in a quiet and orderly fashion. **DO NOT RUN!!** Check in with your counselor when you get outside.
- Mail / Messages – Check the Message bulletin board outside the RD's room for messages or mail.
- Ordering Food – Only counselors can order food for campers, which must be done before 9pm. If you wish to order food, talk to a counselor.
- Practice in the Residence Halls – Practicing will be allowed in the dorms between 7am and 10pm only when a counselor is present in the dorms.
- Room Condition – Rooms should be kept in a respectable manner. For your own protection, keep your door locked at all times. **DO NOT** give your room code out to ANYONE. We are not responsible for any damaged or stolen personal items.

- Room Visitation – Boys and girls are separated by floor. Girls are not allowed on the boys' floors at any time, nor are boys allowed on girls' floors at any time. Failure to adhere to this rule will result in the loss of the evening activity.

What to bring:

- Dormitory Items - Bedsheets (extra long twin), pillows, blankets, toiletries (shampoo, soap, toothbrush, toothpaste, etc.), shower shoes, towels, hangers, alarm clock, fan, etc.
- Clothing - T-shirts and shorts are recommended. Bring comfortable shoes. A sweater or sweatshirt is recommended for air-conditioned classrooms.
- Concert Dress - Bring khaki or denim shorts. A camp t-shirt will be provided!
- Instruments - Make sure to bring extra reeds, cork grease, valve oil, mouthpieces, mutes, and any extra items you may need to keep your instrument in working order.
- Extra Items - Camera & film, no more than \$50 in spending money for snacks at camp store, cellular phone.
- Bring a pencil!

What NOT to bring:

- Please do not bring TVs, computers, hand-held video games, valuables, or any other unnecessary personal belongings.

**Commuter Information**

Check-In:                      Sunday, July 17<sup>th</sup>, 2011                      3pm                      White Hall 023

- All commuters and their parents are expected to attend a brief meeting at 3pm to officially check-in. Students will be given their audition time at this meeting, and parents will be given an information packet with finalized details for the week.
- Commuters are expected to be at camp promptly at 8:45am each day. Please see the enclosed schedule for tentative check-out times each day.
- Parents of commuters will sign their campers in and out every day at the registration table in White Hall near room 125.
- Commuters over the age of 16 may sign themselves in and out.
- Commuters are expected to leave camp at the completion of their last rehearsal, unless there is an evening activity, which the commuters are allowed to attend. Please see the enclosed schedule for tentative check-out times each day.
- Commuters cannot leave campus during the day.
- Commuters are not allowed to transport any students in their car without permission from all legal guardians involved.

What to bring:

- Clothing - T-shirts and shorts are recommended. Bring comfortable shoes. A sweater or sweatshirt is recommended for air-conditioned classrooms.
- Instruments - Make sure to bring extra reeds, cork grease, valve oil, mouthpieces, mutes, and any extra items you may need to keep your instrument in working order.
- Extra Items - Camera & film, no more than \$50 in spending money for snacks at camp store, cellular phone
- Bring a pencil!

What NOT to bring:

- Please do not bring TVs, computers, hand-held video games, valuables, or any other unnecessary personal belongings.

### Emergency Contact Information

If an emergency arises during camp, and you need to contact us, please call 203.837.8614 during normal business hours, or the WCSU Police Department at 203.837.9300 after hours.

Directions to WCSU's Midtown Campus: [www.wcsu.edu/directions](http://www.wcsu.edu/directions)

We still have openings, so tell your friends! We can accommodate roommate requests.

We look forward to seeing you in July! If you have any questions, please let us know.

Thanks,

Laura Piechota  
[piechotal@wcsu.edu](mailto:piechotal@wcsu.edu)  
 203.837.8614

### Band Camp 2011 Schedule (subject to change)

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
7:30-8:30		Breakfast					
8:30-9:00		Announcements 8:45 Commuters Arrive					
9:00-12:00	Residents Move In 9-11am	Chamber Rehearsals, Jazz Rehearsals, MIDI & Musicianship					Wake Up, Pack & Brunch
12:00-1:00	Lunch & Resident Meeting	Lunch					Steel Pan & Band Concert
1:00-2:00	Auditions	Free Time & Activity					12 pm
2:00-4:00	Commuter Check In 3pm	Concert Band & Steel Pan Rehearsals, MIDI & Musicianship					
4:00-5:00		Choir Commuter P/U at 5pm unless noted below					
5:00-6:00	Dinner						
6:00-9:00	Concert Commuter P/U 8pm	Resident Activity	Resident Activity	Resident Activity	Chamber Concert 7pm Commuter P/U 9pm	Jazz Concert 7pm Commuter P/U 9pm	
9:00-10:00	Free Time						
10:00-10:30	Lights Out						

## **An important note about forms:**

The forms listed **must be submitted** or you will not be eligible to attend camp.

Camp Application (with tuition)

Parent-Camper Contract

Participant Health Information (2 pgs)

Physical Exam Record

Medication Authorization (**Only required if camper will take prescription medication**)

**Your child must have had a physical examination on or after July 23, 2008 in order to attend Band Camp in 2011.** You must submit the Physical Exam Record (completed and signed by your child's medical practitioner) **by July 1, 2011.** You may submit your doctor's form instead, if it contains the following:

- the date of your child's last physical examination
- immunization record for the routine immunizations listed on the Physical Exam Record
- any information pertinent to routine or emergency care
- list of prescription or over-the-counter medication\*\*
- a list of allergies and/or special diet needs
- name, address and phone number of the medical care provider
- signature of Physician, PA, APRN, or RN

If your child attended camp in 2009 or 2010 we may have a valid Physical Exam Record on file. Contact Laura's office at [musiccamp@wcsu.edu](mailto:musiccamp@wcsu.edu) to check if you need to submit a new form.

If your child will be taking prescription medication you must also submit the Medication Authorization form. This form needs to be signed by the prescriber and a parent or guardian. You must submit **a separate form for each medication.**

We can only accept tuition payments in the form of cash, check or money order. Please make checks and money orders payable to WCSU. You may submit several payments or pay at once. **Balances are due on July 1, 2011.** Please contact Laura's office at [musiccamp@wcsu.edu](mailto:musiccamp@wcsu.edu) with questions about payment balances.

**RESIDENT CAMPERS:** We have a limited number of Resident Camper spots. If on July 1, we have not received all of your forms and payment, and if you have not contacted us with any special circumstances, **you may lose your spot in the dorms.**

Please contact Laura Piechota at 203.837.8614 or [piechotal@wcsu.edu](mailto:piechotal@wcsu.edu) or [musiccamp@wcsu.edu](mailto:musiccamp@wcsu.edu) with any questions or concerns.



**Band Camp 2011  
Parent-Camper Contract  
Complete and return by July 1, 2011.**

**Parent/Guardian:**

I/We understand that if a medical problem or condition arises, every reasonable attempt will be made by WCSU music camp staff to contact the parent/guardian.

I/We give permission for photographs or videotapes to be taken during WCSU Summer Music Camp Events and concerts. These may be used for promotional purposes.

I/We give my/our child permission to see movies **up to and including** the following rating **(circle one)**:

G      PG      PG-13

I/We have read the camp handbook and understand the camp expectations **(circle one)**:

Yes      No

Resident Roommate Requests: \_\_\_\_\_

**(Requests will only be accommodated if all parties are in agreement.)**

Camper's age on July 1, 2011: \_\_\_\_\_

Sex (circle):      Male      Female

Camp (circle):      Band      String

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Parent Name

I have read the camp handbook and understand the camp expectations **(circle one)**:

Yes      No

\_\_\_\_\_  
Camper Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Camper Name



# Band Camp 2011 Participant Health Information

This form (**TWO PAGES**) must be completed and signed by the participant's legal guardian for all participants who are under 18 or haven't completed high school in order to attend. The information we ask you to provide is necessary in the event your child needs medical treatment while the programs are in session. **This form is due by July 1, 2011**

## Participant Information

Camper Name \_\_\_\_\_ Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ Gender \_\_\_\_\_  
Home Address \_\_\_\_\_  
Street City State Zip  
Home Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Grade entering Fall 2011: \_\_\_\_\_

## Parent / Guardian Emergency Contact Information

Parent / Guardian \_\_\_\_\_ Relationship to Camper \_\_\_\_\_  
Home Address \_\_\_\_\_  
Street City State Zip  
Home Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
Cell Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Usual Work Hours: \_\_\_\_\_

Parent / Guardian \_\_\_\_\_ Relationship to Camper \_\_\_\_\_  
Home Address \_\_\_\_\_  
Street City State Zip  
Home Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
Cell Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Usual Work Hours: \_\_\_\_\_

## Alternate Emergency Contact (non parent/guardian)

Name \_\_\_\_\_ Relationship to Camper \_\_\_\_\_  
Home Address \_\_\_\_\_  
Street City State Zip  
Home Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
Cell Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Usual Work Hours: \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Camper \_\_\_\_\_  
Home Address \_\_\_\_\_  
Street City State Zip  
Home Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
Cell Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Usual Work Hours: \_\_\_\_\_

## Allergies

Known Allergies to medications \_\_\_\_\_  
Other known allergies (food / environmental) \_\_\_\_\_

## Activity Restrictions

\_\_\_\_\_ My child has certain activity restrictions. Explain: \_\_\_\_\_  
\_\_\_\_\_

**Participant Health Information - Page 2**

**Prescription Medication**

\_\_\_\_\_ My child will **not** take medication.

\_\_\_\_\_ My child will take medication. Please return one completed and signed Medication Authorization form for **each** prescription that your child will take. We are not able to administer medication without the completed authorization.

**Over-the Counter Medication**

Listed below are some of the over-the-counter medications approved by our camp physician for use by our camp health staff, in accordance with our treatment procedures. **You do not send these to camp.** Please indicate if your child may/may not be given these medications. **(Please circle "yes" or "no" for each).**

Ibuprofen (Advil)	Yes	No	Tums	Yes	No
Acetaminophen	Yes	No	Kaopectate	Yes	No
Benadryl	Yes	No	Pepto-Bismol	Yes	No
Sudafed	Yes	No	Mylanta	Yes	No
Robitussin Expectorant	Yes	No	Throat Lozenges	Yes	No

**Insurance Information**

Name of Insurer \_\_\_\_\_ Policy Number \_\_\_\_\_

**PLEASE INCLUDE A COPY OF BOTH SIDES OF YOUR INSURANCE CARD.**

**Additional Information**

Please use this space to provide us with any additional relevant information:

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**Medical Treatment Consent**

I, the legal guardian of the above-named camper, give permission to WCSU Summer Music Camp Health Supervisor to provide routine health care, administer prescribed medications and seek emergency medical treatment as they see necessary at Danbury Hospital or another nearby facility. I consent to any x-ray, anesthetic, medical or surgical diagnosis or treatment and hospital care subsequently deemed necessary by a licensed health care provider during the participant's session. I understand that this authorization is given in advance of any specific diagnosis, treatment or hospital care, and that it is given to provide the Camp Director authority to seek medical treatment, and to provide a licensed health care provider the authority to administer this treatment as he/she judges necessary to the above-named child. I authorize any medical facility which renders services to release medical information necessary for the processing of insurance claims. I understand that whenever possible, the Camp Director will make a good faith effort to contact me or the above-named person(s) before seeking treatment. If this is not possible, I understand that the Camp Director will notify me or my designee as soon as possible of any and all diagnoses and treatments.

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

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_



WCSU Band Camp 2011  
Physical Exam Record

A physical examination is **required** within **3 years** of the final date that your child will attend the 2011 WCSU Summer Music programs. This form **must** be completed and signed by one of the specified medical practitioners listed in the signature section at the bottom of the form prior to participation in the summer music program. **Your child will not be permitted to participate in the program without a signed and completed copy of this form on file.** This form is due **July 1, 2011.**

Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex \_\_\_\_\_

**TO BE COMPLETED BY THE SPECIFIED MEDICAL PRACTITIONER:**

Date of last physical exam: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_ May participate in all camp activities

\_\_\_\_\_ May participate except for: \_\_\_\_\_

Medical information pertinent to routine care and emergencies: \_\_\_\_\_

Is this individual taking prescription or over the counter medication(s)?      Yes      No

If yes, indicate names of medication(s): \_\_\_\_\_

Does the individual have allergies?      Yes      No      Explain: \_\_\_\_\_

Is the individual on a special diet?      Yes      No      Explain: \_\_\_\_\_

Does the individual have special needs?      Yes      No      Explain: \_\_\_\_\_

**This participant is up-to-date** on the following routine childhood immunizations currently recommended by the American Academy of Pediatrics and National Advisory Committee on Immunization Practice:

	YES	NO		YES	NO
Measles			Hepatitis B		
Mumps			Diphtheria		
Rubella			Pertussis		
Chickenpox			Pneumococcal conjugate		
Tetanus			Polio		

Comments: \_\_\_\_\_

Print name of medical care provider: \_\_\_\_\_

Medical Care Provider's Address: \_\_\_\_\_  
Street City State Zip

Telephone Number: \_\_\_\_\_

\_\_\_\_\_  
Signature of Physician, PA, APRN or RN

\_\_\_\_\_  
Date Form Signed



WCSU Band Camp 2011  
Medication Authorization

If the camper will be taking prescription medication, this form must be filled out and signed by a parent/guardian and by the prescriber. **Please complete and return this form by July 1, 2011.**

**Authorized Prescribers Order** (Physician, Dentist, Physicians Assistant, Advanced Practice Registered Nurse):

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Medication: \_\_\_\_\_ Controlled Substance Yes No

Dosage \_\_\_\_\_ Method \_\_\_\_\_

Administered: Breakfast Lunch Dinner Bedtime Other \_\_\_\_\_

Specific Instructions for these Medications \_\_\_\_\_

Length of time medication is being taken Start Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Stop Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Can the child self-administer the medication? Yes No

Side Effects for the Medication \_\_\_\_\_

Plan of Management for Side Effects \_\_\_\_\_

Food or Drug Allergies? Yes No Reactions? Yes No Interactions? Yes No

If "yes" to any of the above, please explain \_\_\_\_\_

Prescriber Name \_\_\_\_\_ Phone Number (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Prescriber's Address \_\_\_\_\_  
Street City State Zip

**Prescriber Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent/Guardian Authorization for Administration of Medication as described and directed above:**

Name \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

Home Address \_\_\_\_\_  
Street City State Zip

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

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_